## L05000092169

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Considerations to Siling Officer				
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06/28/10--01006--014 \*\*25.00

FILED
10 JUN 28 AH 10: 56
SECRETARY OF STATE
SECRETARY OF FLORIDA

## COVER LETTER

TQ: Registration Section Division of Corporations						
SUBJECT:	Orlando South Park IV Development LLC					
		Liability Company				
The enclosed Art	les of Amendment and fee(s) are subm	itted for filing.				
Please return all o	rrespondence concerning this matter to	the following:				
		Norberto Duarte				
	Name of Person					
	Orlando South Park IV Development LLC					
Firm/Company						
	886	8865 Commodity Circle				
		Address				
		Orlando, Fl 32819				
		City/State and Zip Code	Contract to			
	E-mail address: (to b	norbertcorporation.com pe used for future annual report notificat	ion)			
For further inform	ation concerning this matter, please call	:	· .			
	Yvette Iturrino	at (	18-2626			
	lame of Person	Area Code & Daytime To	elephone Number			
Enclosed is a che	c for the following amount:					
\$25.00 Filing	ee \$\sums\$\frac{1}{30.00}\$ Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	AAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 allahassee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons'			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED,
10 JUN 28 AM 10: 57
SECRETARY OF ATTACHMENT

Orlando Sout	h Park IV Developme	ent LLC TALLAHASSEE, FLORIDATE	
(A Flori	ility Company as it now appear da Limited Liability Company)	s on our records.	
The Articles of Organization for this Limited Liabilit Florida document numberL0500092169	· · ·	09/20/2005 and assigned	
This amendment is submitted to amend the following	<b>;</b> :		
A. If amending name, enter the new name of the l	imited liability company her	<u>e</u> :	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	***************************************		
(Principal office address MUST BE A STREET AD	DRESS)	4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	En	ter Florida street address	
<del></del>	City	, Florida Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	James Michael Pertree	6425 Cartmel lane Windermere, Fl 34786	Add Remove
			Add Remove
			Add Remove
	<u> </u>		Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, ente	er change(s) here: (Attach additional sheets, if necess	<u></u> ,
			FILED  10 JUN 28 AN IO: 57  SECRETARY OF STATE ALLAH SSEE, FLORIDA
Dated	June 23	2010	
•	Signature of a	nember of authorized representative of a member  Norbert R. Duarte  Typed or printed name of signee	

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Filing Fee: \$25.00