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S. HAWKES

OCT 2 8 2010

EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	ct: St		Development Company ted Liability Company	LLC
The encl	osed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspon	dence concerning this matter	to the following:	
			Kevin Thomas	
		Steinhatchee I	River Development Comp	any LLC
			Firm/Company	
			2348 Pine Street	
			Address	
			Naples, FL 34112	
			City/State and Zip Code	
		E-mail address: (1	evin@thomasbiz.net o be used for future annual report not	fication)
For furth	ner information cor	ncerning this matter, please c	all:	
		in Thomas	at (239)	253-6777
	Name of	Person	Area Code & Daytı	ne Telephone Number
Enclosed	is a check for the	following amount:		
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			•	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Steinhatchee River Development Company LLC

(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appearaisability Company)	rs on our records.)	
The Articles of Organization for this Limited L	iability Company	were filed on	09/22/2005	and assigned
Florida document numberL05000093	3166		•	<u>.</u> :
This amendment is submitted to amend the follows:	Ť		\(\text{\text{F}} \)	OR 21 PHID
A. If amending name, enter the new name of	the limited har	ouity company her	<u>e</u> :	PH/S
The new name must be distinguishable and end wit "L.L.C."	h the words "Lim	ited Liability Compa	ny," the designation "I	LC" or the abbreviatio
Enter new principal offices address, if applicable:		2348 Pine St	reet	**
(Principal office address MUST BE A STREE	(Principal office address MUST BE A STREET ADDRESS)		4112	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2348 Pine St Naples, FL 3		
B. If amending the registered agent and/orthe new registered of			our records, <u>enter t</u>	he name of the ne
Name of New Registered Agent:	Kevin Thomas			
New Registered Office Address:	2348 Pine S		ter Florida street add	ress
		Naples		34112
		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 = Man MGRM = M	ager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Kevin Thomas	2348 Pine Street Naples, FL 34112	✓ Add Remove
MGR	Steve Baccardi	6896 Trail Boulevard Naples, FL 34108	
			Add
			Remove PH
			PAdro Remove
D. If amendi	ing any other information, c	enter change(s) here: (Attach additional sheets, if neces	Add Remove
_			
			_
Dated	October 25		
,	Signature	of a member or authorized representative of a member	
		Kevin Thomas	
	**************************************	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00