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EXAMINER

COVER LETTER

TO: Registration S Division of Co					
SUBJECT: Win	kler-B LLC Name of Limit	ed Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	nitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	Stephen W F	Haywood Name of Person			
	Tudor Villas	Realty Corp			
		Firm/Company			
	P 0 Box 101526	Address :	raure e		
	Cape Coral,		•		
		City/State and Zip Code		s 2	
For Contact in Commention		Nahoo.com be used for future annual report notificat	ion)	2010 NOV 29	Name of Street
·	concerning this matter, please ca	220 0/5 10/0	होती. कार्ट्स जिल्हा	<u>.</u>	Account of the second
	f Person	at (239) 943-1949 Area Code & Daytime To	العار الإدر العار العار ال	3 (
Enclosed is a check for the	ne following amount:		, , , , , , , , , , , , , , , , , , ,	~	
x \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee Certificate of S Certified Copy (additional copy	tatus &)

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
Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WINKLER-	B, LLC	· · · · · · · · · · · · · · · · · · ·		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now app ited Liability Compan	ears on our records.) y)		
The Articles of Organization for this Limited Liability Com	pany were filed on _	09/30/2005	and assi	gned
Florida document number <u>L05000096662</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company	here:		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Cor	npany," the designation '	'LLC" or the al	bbreviation
Enter new principal offices address, if applicable:	·			
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>			<u> </u>
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	•	70 NO	Congress
(Mailing address MAY BE A POST OFFICE BOX)			V 29	TEMPORE L.
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		n our records, <u>enter</u>	the name of	
Name of New Registered Agent:				
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	Enter Florida street aa	ldress	
Planting the contract of the c	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>Name</u> Type of Action **Title** <u>Address</u> 805 SW 52nd Street Eleanor Jane Funk _MGR___ Cape Coral, FL 33914 Remove □ Add Remove Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated <u>October 11</u>

Page 2 of 2

Stephen W. Haywood

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00