105000107011

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Duging and Euklin Manna)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900132065129

07/10/08--01006--024 **30.00



M. THOMAS

JUL 1 0 2008

EXAMINER

COVER LETTER

TO:	Registration Solution of Con		૱	
SUBJI	ECT: AUSTI	N CREEK, LLC		
		(Name of Lim	ited Liability Company)	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
				OS JUL 10 PH 2: 00 TALLAHASSEE, FLORI
		_ANTOINE BOULOS	·	
	•		(Name of Person)	THE OWNER
				SERVE
		AMR DEARTOLHEUL	& CONSTRUCTION, LLC (Firm/Company)	?:
			(i mai company)	6E 8
		310 BLOUNT STREE	ET, UNIT 108	and the second
			(Address)	
		TALLAHASSEE, FL	32301	
		•	(City/State and Zip Code)	
For fu	rther information	concerning this matter, please o	all:	•
	ANTOINE BOUL	.os	at (850) 222-0665	
(Name of Person)		of Person)	(Area Code & Daytime Telephone Number)	
Enclos	ed is a check for t	the following amount:		
□ \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section			STREET/COURIER Registration Section	R ADDRESS:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	N CREEK, LLC		
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our ed Liability Company)	r records.)	
The Articles of Organization for this Limited Liability Comp	any were filed on NOVEMBER	2 3. 2005 and assigned	
Florida document number L05000107011		,	
This amendment is submitted to amend the following:		(
A. If amending name, enter the new name of the limited	liability company here:		
		SEC T	
The new name must be distinguishable and end with the words "I "L.L.C."	Limited Liability Company," the	designation "Licior the abbreviation	
Enter new principal offices address, if applicable:		5/2 p m	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		
		95 8	
		Dr.	
Enter new mailing address, if applicable:		·	
(Mailing address MAY BE A POST OFFICE BOX)	***************************************		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ords, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	, Florida		
	(City)	(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 Type of Action **Title** <u>Name</u> **Address** 310 BLOUNT ST, UNIT: 108 P3 DEVELOPMENT, LLC Add MGRM TALLAHASSEE, FL 32301 Remove 310 BLOUNT STREET, UNIT 108 Add Add MCRM AMR DEVELOPMENT & Remove TALLAHASSKE, FL 32301 CONSTRUCTION, LLC Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated Signature of a member or authorized representative of a member Peter Rosen Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00