L0500008151

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EXAMINER

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03/18/08--01025--004 **25.00



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TOWN HALL AT TRADITION, LLC (Name of Limited Liability Company)	
(came as <u>_</u> amain, _amain,	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
J. PAUL FANNING, ESQ. (Name of Person)	
CORE COMMUNITIES, LLC (Firm/Company)	
10521 SW VILLAGE CENTER DRIVE (Address)	
PORT ST. LUCIE, FLORIDA 34987 (City/State and Zip Code)	7008 MAR
For further information concerning this matter, please call:	
J. PAUL FANNING, ESQ. at (772) 340-3500 易云	
(Name of Person) (Area Code & Daytime Telephone Number)	04
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified C	of Status &

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

TOWN HALL AT TRADITION		
(<u>Name of the Limited 1</u> (A I	Liability Company as it now appears on Florida Limited Liability Company)	our records.)
`	, , , , ,	
The Articles of Organization for this Limited Lia	bility Company were filed on Novem	ber 7, 2005 and assigned
Florida document number <u>L05000108151</u>	·	
This amendment is submitted to amend the follow	ving.	
This unfortainent is submitted to unfort the fortox	······································	
A. If amending name, enter the new name of t	the limited liability company here:	
LANDING PHASE II, LLC		
The new name must be distinguishable and end with	the words "Limited Liability Company,"	the designation "LLC" or the abbreviation
"L.L.C."		
B. If amending the registered agent and/or		ecords, enter the name of the new
registered agent and/or the new registered offi	ce address here:	l TAL S
		2000 SECF
		三 富 三
Name of New Registered Agent:		8
Navy Begintaged Office Address		
New Registered Office Address:	(Enter 1	lorida street;address)
	(27.00.2	
		, 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:

ě.

MGR = Manager

<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Add
			Kemove
			Add
			
			Add Remove
			□Add
			Remove
			Add
			Remove
D. If amen	ding any other information, enter cl	hange(s) here: (Attach additional sheets, if necessary)	
		ORID	
			
Dated	Word 17	2008 -	
		Definance	
	//	ember or authorized representative of a member T. Paul Fanning	
		yped or printed name of signee	- · · · · · · ·

Page 2 of 2

Filing Fee: \$25.00