W5000 118673

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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2010 MAR 22 AM 11: 26
SECRETARY OF STATE
TALL AND SEFE FLORID

T. CLINE

MAR 23 2010

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Palms Cascade LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ashtey Busi
Pudential Palms Realty
Firm/Company
130 N. TAMIAMI TrAIL
Address
SAVASOTA, FL 34236
ashley carter of prodential palms Fally. Dom E-mail address: (to be used for future annual report notification)
SEX N
A THE LOCAL COLUMN THREE COLUMN
AShley Busi at 941,552-4263 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution \$30.00 Filing Fee Solution \$55.00 Filing Fee Solution \$60.00 Filing Fee, Certificate of Status Solution \$60.00 Filing Fee, Certificate \$60.00 Filin

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

 	City	Zip Code
		. Florida
New Registered Office Address:	Enter Flor	ida street address
Naw Paristanad Office Address:		
Name of New Registered Agent:		
registered agent and/or the new registered office addre		
B. If amending the registered agent and/or register	red office address on our rec	ords, enter the name of the new
		D
(Mailing address MAY BE A POST OFFICE BOX)		PRIE 2
Enter new mailing address, if applicable:		e.Fr.
		m² m² mì
		TAR ASS
(Principal office address MUST BE A STREET ADDRE	ESS)	PRE I
Enter new principal offices address, if applicable:		2010 HAR SECRET
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the	
The second of th	67 : 2. 17 : 1 !!! C	1 ' STACOO ALLE SA
A. If amending name, enter the new name of the limite	ed liability company here:	
This amendment is submitted to amend the following:		
Florida document number L05000118673	<u>≥</u> .	
The Articles of Organization for this Limited Liability Co	empany were filed on $\frac{12/13}{}$	and assigned
		4
(Name of the Limited Liability	Company as it now appears on ou mited Liability Company)	r records.)
talms cascade Lu		

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
MGR	Helen Sosso	130 N. TAMIAMI TVAIL SAVASOTA: FL 34234	Add Remove
MGR_	MARIC SOSSU	(30 N. Tamiami Trail Sarasota, Fr. 34236	Add Remove
			Add Remove
			200 move 7
			22 Add Remove Plans
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	<i>).)</i>
			<u> </u>
Dated MP		>10	
	/ Scot	- -	
	Type	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00