## LU60WU18105

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**EXAMINER** 

## **COVER LETTER**

TO:

TO:	Registration Sec Division of Corp				
SUBJE	CT·	4327	Arnold, LLC		
о <b>ов</b> ог.	Name of Limited Liability Company				
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		TOMAR -8 MM 28
Please 1	return all correspo	ndence concerning this matter	to the following:		A B COM
			Craig Timmins Name of Person		3
	J		Name of Person		28
			4327 Arnold, LLC Firm/Company		
c/o Investment Pro			p Corp-3838 Tamiam	i Trial North-#402	
			Naples, FL 34103 City/State and Zip Code		
For fur	ther information co	e-mail address: (i oncerning this matter, please c	to be used for future annual reposall:	ort nouncation)	
		aig Timmins	at ( 239)	261-3400	
	Name of	f Person	Area Code &	Daytime Telephone Number	
Enclose	ed is a check for th	ne following amount:			
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en		of Status &
MAILING ADDRESS: Registration Section		Registration			
Division of Corporations P.O. Box 6327			Division of Corporations Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4327 Arnold, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 2/17/2006 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned L06000018105 Florida document number \_\_\_\_\_ 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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new

New Registered Agent's Signature, if changing Registered Agent:

registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

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.

Craig Timmins

If Changing Registered Agent, Signature of New Registered Agent

c/o Investment Prop Corp-3838 Tamiami Tr North Suite 402

Enter Florida street address

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 Address** <u>Title</u> Name ☐ Add Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 3 Signature of a member or authorized representative of a member Craig Timmins Typed or printed name of signee

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Filing Fee: \$25.00