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•	(Requestor's Name)
	(Address)
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	(Business Entity Name)
	(Document Number)
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EXAMINER

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SECRETARY OF STATE
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COVER LETTER

Division of Co	rporations		
SUBJECT:	Westwinds	Development, LLC	
3066ECT		ited Liability Company	
			•
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Ronald L. Glas	
		Name of Person	
	Ba	rfield Bay Holdings, Inc	
		Firm/Company	
		P.O. Box 990460	
		Address	
		Naples, FL 34116	
		City/State and Zip Code	<u> </u>
	E-mail address: (glas@barfieldbay.com to be used for future annual report notifications	ation)
For further information (concerning this matter, please c	call:	
	. . O	000	50.4044
Ronald L. Glas Name of Person		at (239) 2 Area Code & Daytime	53-4844 Telephone Number
, and		The code a pay into	i copinale i minosi
Enclosed is a check for t	the following amount:		
∠ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fcc & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

STREET/COURIER ADDRESS:

__ fr

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Westwinds Development, LLC					
(Name of the Limited (A	Liability Company as it now appear. Florida Limited Liability Company)	s on our records.)			
The Articles of Organization for this Limited Li Florida document number L06000019	• • •	2/21/2005 and assigned .			
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	the limited liability company here	ži			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applica	able:				
(Principal office address MUST BE A STREET ADDRESS)					
B. If amending the registered agent and/or the new registered of	or registered office address on o fice address here:	ur records, enter the name of the new			
Name of New Registered Agent:	Ronald L. Glas	TS 0			
New Registered Office Address:	402 11th Street North	er Florida street address			
	Naples City	Florida SPECI dad SPECI 34102			
New Registered Agent's Signature, if changing F	Registered Agent:	2: 08 STATE LORID			
I hereby accept the appointment as registered the provisions of all statutes relative to the paccept the obligations of my position as registering filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of this content.	roper and complete performance of stered agent as provided for in Chare registered office address, V hereby change.	of my duties, and I am familiar with and apter 608, F.S. Or, if this document is			

Page 1 of 2

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 **Title** Name <u>Address</u> **Type of Action** MGRM Andrew Wright 7650 Courtney Campbell Causeway ☐ Add
✓ Remove Suite 920 Tampa, FL_33607__ MGRM Ronald Glas 402 11th Street North ✓ Add Remove Naples, FL 34102 _____ Add Remove _ Add Remove ___Add Remove ∐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated _____ January 1 2009 Signature of a member of authorized representative of a member Ronald L. Glas Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00