L000000001758

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(Requestor's N	ame)	
(Address)		
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(City/State/Zip/l	Phone #)	
PICK-UP WAI	T MAIL	
	,	
(Business Entit	y Name)	
(Document Nur	mber)	
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Special Instructions to Filing Office	ır:	
A. LUNT		
JUN 25 2008		
EXAMINER		
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02



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 27, 2008

JAMES J. DEPETRIS 1001 E. HECTOR STREET SUITE 120 CONSHOHOCKEN, PA 19428

SUBJECT: LEGEND FLORIDA, LLC

Ref. Number: L06000021758

We have received your document for LEGEND FLORIDA, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 708A00033157

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: Legend	l Florida, LLC			_
30B0ECT:		nited Liability Company)		#
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	James J. Depetris			
		(Name of Person)		
	Legend Properties			
		(Firm/Company)		
	1001 E. Hector Street, S	uite 120		
		(Address)	SEC	7049
Conshohocken, Pennsylvania 19428		AHA AHA	= 7	
		(City/State and Zip Code)	SSEY SSEY	
For further information of	concerning this matter, please c	all:	OF STA	
J. W. Taylor		at (_407) 425-9566	DA: 02	·
(Name	of Person)	(Arca Code & Daytime 1	elephone Number)	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	☑\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Certificate o Certified Co (additional c	f 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

Legend Florida, LLC (Name of the Limited Liability Comp (A Florida Limited	Dany as it now appears on our records.) I Liability Company)			
The Articles of Organization for this Limited Liability Comparing Florida document number <u>L06000021758</u> .	ny were filed on 02/28/2006 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	ability company here:			
The new name must be distinguishable and end with the words "Li-"L.L.C."	mited Liability Company," the designation "LLC" or the abbreviatio			
Enter new principal offices address, if applicable:	Fairway Executive Suites			
(Principal office address MUST BE A STREET ADDRESS)	10 Fairway Drive, Suite 110 二倍			
	Deerfield Beach, Florida 3344			
Enter new mailing address, if applicable:	Fairway Executive Suites			
(Mailing address MAY BE A POST OFFICE BOX)	10 Fairway Drive, Suite 110			
	Deerfield Beach, Florida 3344177			
Name of New Registered Agent:				
New Registered Office Address: 111 North C	111 North Orange Avenue, Suite 2000 (Enter Florida street address)			
Orlando	,			
Onando	(City), Florida 32801 (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 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	
		·	Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
		Z.	Add Remove	
D. If amend	ling any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary)	TIP JUN \$3	
		A. J. Phys.		
Dated June 2	20 , 200	08		
	Signatur Ja mem	ber authorized representative of a member	-	
	Typ	ped or printed name of signee	· .	

Page 2 of 2

Filing Fee: \$25.00