## 4060000033742

(F	Requestor's Name)	
(A	Address)	
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## **COVER LETTER**

то:	Registration S Division of Co	ection rporations		
SUBJI	ECT:	75th Sti		
	<del></del>			
_		f Amendment and fee(s) are sub	-	
	<b>-</b>	-	-	
		Na Na	ancy Barnes, Paralegal	
			Name of Person	
		Carey, O'M	lalley, Whitaker & Mueller, P.A	<b>\.</b>
			Firm/Company	<b>₽</b> ≥
		740	0.0-4-0	2011 JUL 25 SECRETARY ALLAHASSE
			712 South Oregon Avenue	
			Address	AR SS
<u> </u>		Ta	ampa, FL 33606-2516	HASSEE, FL
			City/State and Zip Code	
			parnes@cowmpa.com	
		E-mail address: (	to be used for future annual report notificati	on) A
For fur	ther information	concerning this matter, please of	all:	
	N	ancy Barnes	at (_ + )	0-0577
	Name	of Person	Area Code & Daytime To	lephone Number
Enclos	ed is a check for t	the following amount:		
	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section			STREET/COURIER Registration Section	ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tailahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	5th Street \					
(Name of the Limited L (A F	<u>iability Compar</u> Torida Limited L	iy as it now appea iability Company)	ers on our records.			
The Articles of Organization for this Limited Liab Florida document numberL060000237	oility Company	•		and assigned		
This amendment is submitted to amend the follow	ving:			FIL 25 2011 JUL 25 FALLAHASS		
A. If amending name, enter the new name of t	<u>he limited liabi</u>	lity company he				
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Comp	any," the designation '	BY or the abbreviation		
Enter new principal offices address, if applical	ole:	526 - 56th S	treet	<b>D</b>		
(Principal office address MUST BE A STREET	ADDRESS)	Holmes Bea	ch, FL 34217			
Enter new mailing address, if applicable:		526 - 56th S	treet			
(Mailing address MAY BE A POST OFFICE BOX)		Holmes Beach, FL 34217				
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, enter	the name of the new		
Name of New Registered Agent:	Andrew M. (	D'Malley				
New Registered Office Address:	712 South C	regon Avenue	)			
	Enter Florida street address					
		Tampa	, Florida	33606-2516		
		Citv		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:

MGR = Manager

MGRM = Managing Member **Type of Action Title** Name 1 Address MGR Greg Ross Development In 5508 Marina Drive, Unit C ☐ Add Holmes Beach, FL 34217 ✓ Remove Arthur Valadie, M.D. MGR **✓** Add 526 - 56th Street ☐ Remove Holmes Beach, FL 34217 ☐ Add ☐ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July Dated Signature of a member or authorized representative of a member Andrew M. O'Malley, Authorized Representative Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00