

LO6000032340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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☐

MAIL

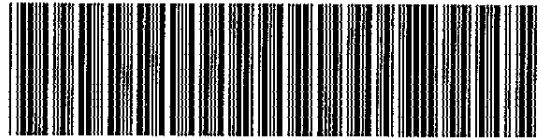
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/06/06--01020--005 **25.00

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06 APR -6 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan APR 11 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Capri Beach Investments, 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:

Joyce A. Tucker CPA
(Name of Person)

Destin Accounting Service, LLC
(Firm/Company)

1234 Airport Rd #118
(Address)

Destin FL 32541
(City/State and Zip Code)

For further information concerning this matter, please call:

Joyce Tucker at 850, 654-9235
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the 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 Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

Capri Beach Investments, LLC
(Present Name)

(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 3/20/06 and assigned
document number L06000032340.

SECOND: This amendment is submitted to amend the following:

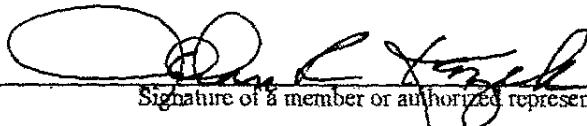
Amend Article IV, Page 2 of 2
as attached.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 APR -6 AM 11:58

FILED

Dated _____



Signature of a member or authorized representative of a member

John R. Kazek

Typed or printed name of signee

Filing Fee: \$25.00

ARTICLE IV- Member(s), Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" – Manager

"MGRM" – Managing Member

MGRM

John R. Kazck
420C Bayshore Drive
Destin, FL 32550

MGRM

David A. Kazck
3100 Seenic Hwy 98 #118
Destin, FL 32541

Member

Joseph A. Kazck
1508 Gardena Ct
The Villages, FL 32159

Member

Douglas D. Smith &
Josephine K. Ryan-Smith
1951 Loia Pointe S.E.
Smyrna, GA 30080

Member

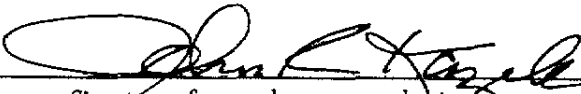
Todd Matthews
485 Trowgate Lane
Atlanta, GA 30350

Member

Patricia D. Skunkard
P.O. Box 359
Mayo, MD 21106

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

John R. Kazck
Typed or printed name of signee