## L06000033854

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DIVISION OF STATE STATE SORPORATIONS

T. HAMPTON'
NOV 8 0 2010
EXAMINER

## **COVER LETTER**

	n of Corpo					
SUBJECT:		1409 AI	PINE RD, LLC			
	•		ited Liability Company			
The enclosed Ar	ticles of Ar	mendment and fee(s) are su	bmitted for filing.			
Please return all	correspond	ence concerning this matter	r to the following:			
DOUGLAS M. BALES						
			Name of Person			
	DOUGLAS C. ZAHM, P.A.					
			Firm/Company			
	12425 28TH STREET N., SUITE 200					
		<del> </del>	Address	<del></del>		
		ST. F	PETERSBURG, FL 33716			
			City/State and Zip Code			
		sch	wartz.gregg@gmail.com to be used for future annual report notifier			
				ation)		
For further inform	mation con	cerning this matter, please of	call:			
Gregg Schwartz		Schwartz	at ( 727 ) 4	42-7075		
-	Name of Po	erson	Area Code & Daytime			
Enclosed is a che	eck for the f	following amount:				
\$25.00 Filing		\$30.00 Filing Fee & Certificate of Status	S55.00 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/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle			
6/5/1999	3.00	and opposite the				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATIONS

10 NOV 29 AM 3: 02

14	09 ALPINE RD, LLC		
( <u>Name of the Limited Liz</u> (A Flo	ability Company as it now appear or ida Limited Liability Company)	ers on our records.)	
The Articles of Organization for this Limited Liabi	lity Company were filed on	03/31/2006	and assigned
Florida document number L0600003383			
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Comp	any," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			<del></del>
New Registered Office Address:			
	Er	nter Florida street add	ress
-	City	, Florida	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 ainending 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			
MGRM	Ulysses Felder .	3600 Grand Ave., Ste. 104 Miami, FL 33131	Add Remove			
<u>MGRM</u>	Gregory E. Schwartz	2139 NE Coachman Rd., Ste. 1 Clearwater, FL 33765	Add ✓ Remove			
MGRM	Tampa Bay Community Development Corporation	TBCDC 2139 NF Coaschman Rd Ste 1 Clearwater, FL 33765	_☑ Add Remove _			
MGRM	ULF Enterprises, LLC	3600 Grand Ave., Ste. 104 Miami, FL 33/31	Add Remove 			
			Add Remove 			
			Add Remove			
D. If amendin	g any other information, enter change(s	here: (Attach additional sheets, if necessary.)	SECRETARY OF SOME SECRETARY OF SOME OF CORPOR			
	Nov. 18 , 2010	•	3: 02			
-	hugon E. Sal	authorized representative of a member				
Gregg Schwartz  Typed or printed name of signee						
	i yped or	printed name of signee				

Page 2 of 2

Filing Fee: \$25.00