L060000 34868

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies: Certificates of Status		
Special Instructions to Filing Officer:		
·		
<u> </u>		

Office Use Only



000161029640

09/30/0901010009	**25.00	

B. KOHR

OCT - 2 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporation	ns .	
SUBJECT: Collins Mil	1 Creek, LLC Name of Limited Liability Company	-3
	nent and fee(s) are submitted for filing.	OBSEP 30 PM 1: 32
	Jeffrey C. Sweet, Esquire Name of Person	PA 1:
	595 W. Granada Blvd., Suite A Firm/Company	
	Address	
. 35.	Ormond Beach, FL 32174	the state of the s
all the street of	City/State and Zip Code	San ang kanganan ka
	JCSPENNY@BELLSOUTH.NET E-mail address: (to be used for future annual report notification)	•
For further information concerning	g this matter, please call:	
Penny K. Every	at (386) 677-3431	
Name of Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for the follow	ring amount:	
X \$25.00 Filing Fee \$30	0.00 Filing Fee & S55.00 Filing Fee & Certificate of Status (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction Registration Section porations Division of Corporatio Clifton Building	ns

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OSCP 30 PM 1:32

COLLINS	S MILL CREEK, LLC	3	
(Name of the Limited Liability (A Florida L	Company as it now appears on our imited Liability Company)	records.)	
The Articles of Organization for this Limited Liability Conference of Comment Number <u>L06000039868</u>	ompany were filed on <u>April 17</u> 	•	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company here:		
The new name must be distinguishable and end with the wore "L.L.C."	ds "Limited Liability Company," the	designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	ESS)		
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		rds, <u>enter the name of the new</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	City	Zin 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

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR	John F. Gil	llespy	5461 Collins Mill Creek Drive Milton, FL 32570	Add Remove
MGR	Thurman Gi	llespy, Jr., M.D	. 1075 Mason Avenue Daytona Beach, FL 32117	X Add Remove
				Add Remove
				Add Remove
				□Add □Remove
				Add Remove
D. If ar	mending any other info	rmation, enter change	(s) here: (Attach additional sheets, if necessary.)	_
				_
Dated _	July 15m	The Shay	or authorized representative of a member	
		Thurman Gillespy		
		Typed o	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00