## L06000056241

(Re	questor's Name)		_			
(Ad	(Address)					
(Address)						
(Cit	ty/State/Zip/Phone	: #)	-			
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nan	ne)	-			
(Do	cument Number)		-			
Certified Copies Certificates of Status						
Special Instructions to	Filing Officer:					
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SECRETARY OF STATE SECRETARY OF STATE ONS



## **COVER LETTER**

SUBJECT: MOC	ORE HAVEN RIVER	WALK, L.L.C.		
	(Name of Li	mited Liability Company)		
The enclosed Articles	s of Amendment and fee(s) are sul	omitted for filing.		
Please return all corre	espondence concerning this matter	to the following:		
	Jhackleen Sujbal	3 X		
		Name of Person)		mana and Line (Am
	Winkler Group Dev	relopment Corp.		
		Firm/Company)	-	e e e
	2000 Glades Roa	d, Suite 410		
		(Address)		
		33431		
	(City	State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
For further information	on concerning this matter, please	call:		SECRE DIVISION
Jhackl	een Sujballi	at (561 ) 961-	1222	ONE TARY
	(Name of Person)	(Area Code & Daytime	: Telephone Number)	ORFO, ED
		•		STATE
Enclosed is a check for	the following amount:			<b>16</b>
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is ex	ķ

**MAILING ADDRESS:** 

TO:

Registration Section Division of Corporations

> 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

## MOORE HAVEN RIVERWALK, L.L.C.

(Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organizatio	on were filed on 1st June 2006 0056241	and assigned					
SECOND:	: This amendment is submitted to amend the following:							
	Please add/change the following:							
	1) add; Jhackleen Sujballi as a Manager/Member Detail							
	2000 Glades Road, Suite 410, Boca Raton, FL 33431							
			;					
			_					
			201					
Dated 17	th July		OIVISION OF AR					
	- Cl	Q	PH 4:					
	Signature	of a member or authorized representative of a m	ember 6 9					
	<b>Henry Thomas</b>	Typed or printed name of signee						
	ryben or britisen ustrue or signee							

Filing Fee: \$25.00