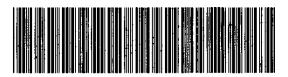
L06000072644

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



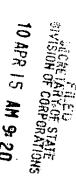
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B. KOHR

APR 1 9 2010

EXAMINER



COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Co	rporations					
SUBJECT:	Team Sout	h Construction LLC				
30B0EC1	Name of Lim					
		,				
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	ondence concerning this matter	r to the following:	10 APR 15 M 920			
		Charles H. Sabin	5			
		Name of Person				
	Charles Sabin Construction LLC					
		Firm/Company				
	431	4314 SE Scotland Cay Way				
		Address				
		Stuart, FL 34997	•			
		City/State and Zip Code				
	E-mail address: (han@teamparksinc.co to be used for future annual repo	om notification)			
For further information	concerning this matter, please of	•				
D	ebbie Mahan	770	701 1616			
Name of Person		at (772) Area Code &	781-1616 Daytime Telephone Number			
Enclosed is a check for t	he following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is er	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: Registration Section Division of Corporations		Registration Division of	Corporations			
P.O. Box 6327		Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Te	am South Co	Instruction LL	.C		
(Name of the Limite	d Liability Compa A Florida Limited I	iny as it now appear Liability Company)	rs on our records.		
The Articles of Organization for this Limited	were filed on	07/21/2006	and assigned		
Florida document number L0600007	<u>72644</u> .				
This amendment is submitted to amend the following	llowing:				
A. If amending name, enter the new name	of the limited liab	oility company her	<u>·e</u> :		
Ch	arles Sabin Co	enstruction LLC			
The new name must be distinguishable and end w "L.L.C."	rith the words "Lim	ited Liability Compa	nny," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:		4314 SE Scotland Cay Way			
(Principal office address MUST BE A STREET ADDRESS)		Stuart, FL 34997			
Enter new mailing address, if applicable:		4314 SE Scotland Cay Way			
(Mailing address MAY BE A POST OFFICE BOX)		Stuart, FL 34997			
B. If amending the registered agent and registered agent and/or the new registered of			our records, enter t	he name of the new	
		<u></u>			
Name of New Registered Agent:	Charles H. Sabin				
New Registered Office Address:	4314 SE Sc	4314 SE Scotland Cay Way			
		Enter Florida street address			
		Stuart	, Florida	34997	
		City		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 <u>Title</u> <u>Name</u> **Address Type of Action MGRM** Charles H. Sabin ✓ Add ☐ Remove 4314 SE Scotland Cay Way Stuart, FL 34997 ☐ Add Remove ☐ Add ☐ Remove ∏Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

Charles H. Sabin
Typed or printed name of signee

Page 2 of 2
Filing Fee: \$25.00