## LOCOCOTULA

(Requestor's Name)					
(Address)					
(Address)					
(Addiess)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(assument rumber)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
_ 					
L. SELLERS					
L. OLLLLI IO					

Office Use Only

APR 11 2011

**EXAMINER** 



000200645070

04/08/11--01008--001 \*\*25.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

## **COVER LETTER**

The state of the s

TO: Registration Division of C			
SUBJECT:	Charles Sab	in Construction LLC	
	Name of Lim	ited Liability Company	y William of Marian
	of Amendment and fee(s) are sub	-	
Please return all corres	pondence concerning this matter	to the following:	
		Charles H Sabin	
	Ol - 4		0
	Charie	es Sabin Construction LL Firm/Company	
		PO Box 596	
		Address	
		Stuart FL 34995	
	·	City/State and Zip Code	• •
	E-mail address: 6	ell@teamparksinc.com to be used for future annual report n	otification)
For further information	concerning this matter, please c		· · · · · · · · · · · · · · · · · · ·
	Carol Bell	at (_772 )	
Name	of Person	Area Code & Day	rtime Telephone Number
	the following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fee, Certificate of Status & Osed) Certified Copy (additional copy is enclosed)
	. <u>922</u> 7 (1) 1		
Regi Divis P.O.	LING ADDRESS: stration Section : sion of Corporations Box 6327 hassee, FL 32314	STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	rporations g : Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Charles Sabin C	onstruction LLC
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company  Florida document numberL06000072644	were filed on
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
Team South Cor	nstruction LLC
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	3481 SE Willoughby Blvd Ste 102
(Principal office address MUST BE A STREET ADDRESS)	Stuart FL 34994
Enter new mailing address, if applicable:	PO Box 596
(Mailing address MAY BE A POST OFFICE BOX)	Stuart FL 34995-0596
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
New Registered Office Address:	- CC
	Enter Florida street address 20
	City Stp Cage 1
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agr	RATE S
the provisions of all statutes relative to the proper and comp	

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

The second secon

	<u>Name</u>	Address	Type of Actio
<del></del> -			Add Remove
			☐ Add ☐ Remove
			Add Remove
			□Add □Remove
			Add
			Remove
amend	ing any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	Remove 
amend	ing any other information, enter chan		Remove 
amend	ing any other information, enter chan		
amend	ing any other information, enter chan $4/5 \qquad \qquad 20$	ge(s) here: (Attach additional sheets, if necessary.)	Remove

Page 2 of 2

Filing Fee: \$25.00