L06000104243

(Requestor's Name)
(Address)
(Address)
(Hadioss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2333
Contification of Obstice
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



400187214524

11/04/10--01003--009 **25.00

NOV - 5 2010

COVER LETTER

Division of Co				
SUBJECT:	Ballymore	e Properites, LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	pondence concerning this matte	r to the following:		
		Rodger M. Taylor		
		Name of Person		
	Ва			
	-			
	1944 Piccadilly Circus			
		Address		
		Naples, FL 34112 -	3687	
	City/State and Zip Code			
rtaylorrm@comcast.net E-mail address: (to be used for future annual report notification)			2018 NOV -4	
For further information	concerning this matter, please	•	ŕ	
Ro	dger M. Taylor	at (239)	384-9630	
Name	of Person		Daytime Telephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is end	closed) Certified	e of Status &
	LING ADDRESS:	STREET/CO	OURIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ballymore Pro		
(Name of the Limited Liability Compa (A Florida Limited I	my as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on October 262	6006and assigned
Florida document numberL06000104293		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the designation '	
L.L.C.		FR B
Enter new principal offices address, if applicable:	1944 Piccadilly Circus	三里 三門
(Principal office address MUST BE A STREET ADDRESS)	Naples, FL 34112 - 3687	
Enter new mailing address, if applicable:	1944 Piccadilly Circus	
(Mailing address MAY BE A POST OFFICE BOX)	Naples, FL 34112 - 3667	₩ T
		······································
B. If amending the registered agent and/or registered of		the name of the new
registered agent and/or the new registered office address her	<u>'e</u> :	
Name of New Registered Agent:		and the same of th
New Registered Office Address:		
	Enter Florida street ad	dress
	, Florida	
	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:

<u> Fitle</u>	<u>Name</u>	Address Type of A
		Add Remove
		Add Remove
		Add Remove
····		AddRemove
 		ACC IS IS Add
		Semove Semove
). If amen	ding any other information, enter chan	i i i i i i i i i i i i i i i i i i i
). If amen 	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)
). If amen — — — —	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)
Oated		ge(s) here: (Attach additional sheets, if necessary.)

Page 2 of 2

Filing Fee: \$25.00