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TALLAHASSEE, FLORIDA

J. BRYAN

JUL 30 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cocoa Cabanas Development, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Justin S. Faires, Esq.

Name of Person

Cocoa Cabanas Development, LLC

Firm/Company

P.O. Box 643372

Address

Vero Beach, FL 32964-3372

City/State and Zip Code

justinafares@msn.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Justin S. Faires, Esq.

Name of Person

at (772)

538-6908

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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**

FILED
10 JUL 29 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Cocoa Cabanas Development, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/30/2006 and assigned
Florida document number L06000105288.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

21 Royal Palm Pointe

Suite 100

Vero Beach, FL 32960

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 643372

c/o Justin S. Faires

Vero Beach, FL 32964-3372

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Justin S. Faires, Esq.

New Registered Office Address:

21 Royal Palm Pointe, Suite 100

Enter Florida street address

Vero Beach

City

Florida

32960

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.

Justin S. Faires
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>	<u>Address</u>	<u>Type of Action</u>
MGR	Yane F. Zana	21 Royal Palm Pointe Suite 100 Vero Beach, FL 32964	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Justin S. Faires	21 Royal Palm Pointe Suite 100 Vero Beach, FL 32964	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Rodney Jiruska	21 Royal Palm Pointe Suite 100 Vero Beach, FL 32964	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Thomas M. Steyer	21 Royal Palm Pointe Suite 100 Vero Beach, FL 32964	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 26, 2010

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Signature of a member or authorized representative of a member

Justin S. Faires, Esq.

Typed or printed name of signee