L06000113864

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nar	ne)
(Document Number)		
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T. HAMPTON

JUN 1 8 2008

EXAMINER

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT: Interba			
	(Name of Lim	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sheri Johnston		
		(Name of Person)	
	Interbay Realty LLC	•	
		(Firm/Company)	
	5010 West Carmen Stre	et Suite 3350	
		(Address)	
	Tampa, Florida 33609		
		(City/State and Zip Code)	
For further information c	concerning this matter, please c	all:	
Sheri Johnston		at (813 ₎ 901-4900 ext 10	2
(Name	of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the	ne following amount:		,
2 \$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

08 JUN 17 AM II

SECRETARY OF STA

TALLAHASSEE, FLOR

Interbay Realty 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 Lial	bility Company were filed on _	11-18-2006	and assigned
Florida document number L06000113864	·		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	the limited liability company	<u>here</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Co	mpany," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	<u> </u>	
(Principal office address MUST BE A STREET	ADDRESS)		·
E 4 20 13 20 11 11			
Enter new mailing address, if applicable:	<u>'</u>		
(Mailing address MAY BE A POST OFFICE B	<u> </u>		<u></u>
B. If amending the registered agent and/or	· registered office address of	on our records, enter	the name of the nev
registered agent and/or the new registered office	ce address here:		
	•		•
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
		, Florida	
	(City)		(Zin 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 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
<u>VP</u>	Carol Christner	5010 West Carment Street Suite 3350 Tampa, Florida 33609	Add Remove
VP	Melvin S. Jacobson	5010 West Carmen Street Suite 3350 Tampa, Florida 33609	Remove
			- n
			Add Remove
			AddRemove
			7 D
D. If ame	ending any other information, ente	er change(s) here: (Attach additional sheets, if ned	OB JUN 17 AM SECRETARY OF S ALLAHASSEE, FI
-			II: 47
Dated Jur	ne 16	2008	
	Signature of a	member or authorized representative of a member	
	Harry Hedaya		
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00