104000119641

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

Office Use Only



800221688458

02/27/12--01040--013 **25.00

T. CLINE

FEB 2,8 2012

EXAMINER

SAMUEL A. HOUGHTON

shoughton@ccmatterneys.com

SHAREHOLDERS

TIMOTHY F. CAMPBELL 5.5

RONALD, L. CLARK¹

CONNIE C. DURRANCE 1

JOHN L. LANCASTER, LL.M?

MICHAEL E. WORKMAN!

ASSOCIATES

J. KEMP BRINSON VELISSE DE LA FE

SAMUEL H. HOUGHTON, SR.

SANDRA B. HOWARD

LAURA L. KELLY '
MICHAEL J. KINCART

OF COUNSEL

THOMAS C. SAUNDERS ***
ALAN L. PEREZ

BOARD CERTIFICATIONS

- 1 Real Estate
- 2 Tax Law
- 3 Elder Law 4 Business Litigation
- 5 City, County & Local Government

6 Cell Trol Law

February 24, 2012

Registration Section

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

Via Federal Express

Re: Odyssey (III) DP II, LLC - Change of Manager

To Whom It May Concern:

Please find the enclosed Articles of Amendment to the Articles of Organization for Odyssey (III) DP II, LLC, which change the manager from Odyssey Diversified Properties III, LLC to OC DIP, LLC.

Feel free to contact me with any questions.

Sincerely,

Samuel A. Houghton,

ccmattorneys.com

COVER LETTER

Division of C				
SUBJECT:	Odysse	y (III) DP II, LLC		
		ited Liability Company		
	of Amendment and fee(s) are su	_		
Please return all corres	pondence concerning this matte	r to the following:		
	Samuel A. Houghton, Esq.			_
Name of Person				
	Clark,	Clark, Campbell & Lancaster, P.A.		
		Firm/Company		-
	500 Sou	500 South Florida Avenue, Suite 800		
Address Lakeland, Florida 33801 City/State and Zip Code				
			ZOIŹFEB SECRETA	
		·	B 27	
	shou	shoughton@ccmattorneys.com E-mail address: (to be used for future annual report notification)		
	E-mail address: (to be used for future annual repor	t notification)	
For further information	concerning this matter, please	call:		TE CRIDE
Samuel	A. Houghton, Esq.	at (863)	647-5337	Sur Mi
Name of Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount:			
	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certifie	ate of Status &
MAILING ADDRESS:		STREET/CO	MIRIER ADDRESS.	

MAILING 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

Odys	sey (III) DP II, LLC	
(Name of the Limited Liabil (A Florid	ity Company as it now appe a Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited Liability	Company were filed on _	March 15, 2006 and assigned
Florida document numberL06000119641	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company h	ere:
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Com	pany," the designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:		
<u>(Principal office address MUST BE A STREET ADI</u>	ORESS)	3/4 3
Enter new mailing address, if applicable:		50 E 12 E
(Mailing address MAY BE A POST OFFICE BOX)		me 📜 III
		20 F
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		our records, enter the name of the new
· · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent:	·	
New Registered Office Address:		
	I	Inter Florida street address
		, 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:

MGR = Manager MGRM = Managing Member Type of Action **Address** <u>Title</u> <u>Name</u> Odyssey Diversified MGR 500 South Florida Avenue Suite 700 Properties III, LLC Lakeland, Florida 33801 **√** Remove MGR OC DIP, LLC ✓ Add 500 South Florida Avenue Suite 700 Remove Lakeland, Florida 33801 ☐ Add Remove Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) February 24 2012 Dated Signature of a member or authorized representative of a member Robert L. Madden,

Page 2 of 2

President of OC Dip, LLC, manager of Odyssey Properties III, LLC

Filing Fee: \$25.00