## L06000121921

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
. (Do	cument Number)	
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B. KOHR
0CT 13 2008

EXAMINER

OCT 13 PH 1: 35



ACCOUNT NO. : 072100000032

REFERENCE : 755315

7147059

AUTHORIZATION

COST LIMIT

ORDER DATE: October 13, 2008

ORDER TIME : 8:44 AM

ORDER NO. : 755315-005

CUSTOMER NO: 7147059

## DOMESTIC AMENDMENT FILING

NAME: COBBLESTONE REALTY, L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Cindy Harris -- EXT# 2937

EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION**

	ES OF AMENDMENT TO S OF ORGANIZATIO	1 PO 8 7
1	OF	\$ 10 m
COBBLESTONE R	REALTY, L.L.C.	
(Name of the Limited Linbil	ty Company as It now appears	on our records.
Amended and Restated The Articles of Organization for this Limited Liability Florida document number  L06000121921	a Limited Liability Company)  Company were filed onMay	Br.
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	ords *Limited Liability Company	," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
•	(Ente	er Florida street address)
		, Florida
,	(Clty)	(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

Title	Name	Address	Type of Action
MGR	Mary Howarth	850 Parkway Jupiter, FL 33477	G Add Remove
MGRM	Michael P. McNiff	850 Parkway Jupiter, FL 33477	Add Remove
MGR	Michael P. McNiff	- 350 Park-ay Jupiter, FL 33477	Add Remove
<del></del>			Add Remove
1			Add Remove
,			Add Remove
D. Ifam	ending any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.	, 
Dated	October 8	2008 .	
	Lossel	ember or authorized representative of a member	
	( Joseph M		

Page 2 of 2

Filing Fee: \$25.00