## L01000006292

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#25.00 #10 APR -8 AMII: OF SECRETARY OF ST PALLAHASSEE, FLO

## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: Paragon Homes 22C  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:						
Daniele Hordon Name of Person						
Name of Person						
Paragon Nones, 22C						
Firm/Company						
18778 WW AT Wheet						
Address						
Miranau JL 33029 City/State and Zip Code						
City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
$\mathbf{O}$						
For further information concerning this matter, please call:						
Name of Person at (754) 246 - 6565  Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \tex						

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 APR -8 AMII: 51

Paragon Hones, 22 (Name of the Limited Liability Compan (A Florida Limited Lim		10 APR - SECRETA	RY OF STATE
(Name of the Limited Liability Compan (A Florida Limited Li	iability Company)	on our records. HAS	SEE, FLORIDA.
The Articles of Organization for this Limited Liability Company	were filed on	1/18/2007	and assigned
Florida document number <u>L07000004292</u> .		·	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here	<b>:</b>	
Paragon Acal Estate (Services, 22C) The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Compan	y," the designation "LI	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	<del></del>	·· <del>·</del>	
			····
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ır records, <u>enter th</u>	ne name of the new
Name of New Registered Agent:		<del></del>	
New Registered Office Address:	Fut	er Florida street addr	2000
	Enter Florida street address		
<del></del>	City	, Florida	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 amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = M MGRM =	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
··			Add Remove
	<del></del>		<b>—</b> ~
			Add Remove
			Pamaya
•			
			AddRemove
D. If amer	nding any other information, en	ter change(s) here: (Attach additional she	
- - -			FILED  10 APR -8 AM II: 54  SECKETARY OF STATE FALLIAHASSEE, FLORIDA-
Dated	april 5th	<u>, 2010</u> .	St.
	_	f a member or authorized representative of a m	ember
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00