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(Requestor's Name)				
(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	→ #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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B. KOHR

OCT 1 4 2010

EXAMINER

COVER LETTER

TO: Registration Solution of Co			The big
SUBJECT: <u>C</u> ∉	6 Lown Mc	ted Liability Company	UD Lands coping LLC
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	A CANAL STATE OF THE STATE OF T
Please return all correspondent	ondence concerning this matter	to the following:	· ·
	<u>Ceulo</u>	a Valdèvies Name of Person	<u>o</u>
	C&G Lau	Eirm/Company	ce and Lands capong U
	2316 E	Robinson ST	·
	Orlando	FL 328 City/State and Zip Code	03
	E-mail address: (1	to be bad for future annual report notifical	ion).
For further information	concerning this matter, please c		,
<u>Cecalia</u> Name o	of Person	at (40) 71514 Area Code & Daytime T	
Enclosed is a check for t	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

(Name of the Limited Liability	y Company as it now appears on our recording Limited Liability Company)	apone CC.	
(A LIOI da	Ellinea Elabinty Company)		
The Articles of Organization for this Limited Liability O	Company were filed on	ard assigned	
Florida document number L 07 00002	<u> 2</u> 733	S. Target	
		> 600	
This amendment is submitted to amend the following:		2 84 H. 55	
A. If amending name, enter the new name of the lim	nited liability company here:	υς. Eg	
		0.	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the designation	ation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	2816 E Robo	nson St	
(Principal office address MUST BE A STREET ADD	RESS) Orlando F	E085E J-	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		emson 8t. 2085E	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	. Flor	rida	
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action	
			_□ Add □□ Remove	
			Add Remove	
			Add Remove	
		Change the address Attess that appears	. •	
	~	2816 E Robinson	_ S+ -	
Dated	0/8/10		_	
	Signature of a member	r or authorized representative of a member	 .	
	Typed	d or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00