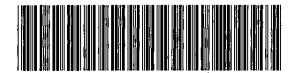
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·				
(Requestor's Name)				
·				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
. (Business Entity Name)				
. (Submission Emily Hamby				
(Document Number)				
(Document Number)				
Codification of Other				
Certified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

Office Use Only



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SECRETARY OF STATE TAILAHASSEE, FLORIDA

8 HAR 21 AM 10:



Premium Title, Inc.

March 20, 2008

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

RE: Articles of Amendment to Articles of Organization of

Grand Horizon Homes, LLC

Florida Document No. L07000023277

Gentlemen:

I am enclosing the original plus one copy of the Cover Letter and Articles of Amendment to the Articles of Organization of Grand Horizon Homes, LLC. I am requesting that same be filed with your office.

I am also enclosing our check in the sum of \$25.00 representing the fee due for filing of same.

Please provide my office with confirmation of the filing along with a copy of same. If you should require anything further to complete the filing, please contact our office.

Sincerely,

Jeanie Germain

enc. stated

PASCO COUNTY OFFICE 14150 6TH STREET DADE CITY, FL 33525 TELEPHONE:352-567-5658 FACSIMILE: 352-567-3928

(SMAIC

COVER LETTER

Division of Co		* • • • • • • • • • • • • • • • • • • •		
SUBJECT: Grand H	lorizon Homes, LLC			
	(Name of Lim	ited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Greg Beebe		·····	
		(Name of Person)		
	Grand Horizon Home	es, LLC		
·		(Firm/Company)		
	4025 Morris Bridge I	Road		
		(Address)		
	Zephyrhills, Florida	33541		68
		(City/State and Zip Code)		声 下
For further information	concerning this matter, please o	eall:		FILED 08 MAR 21 AM 10: 26 SECRETARISEE FLORIDA TALLAHASSEE FLORIDA TALLAHASSEE FLORIDA
Sharon Sumner		at (352) 567-5658		F. ST D: 1
(Name	of Person)	(Area Code & Daytime 1	lelephone Number)	AREA 26
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 St Certified Copy (additional copy	tatus &

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

Grand Horizon Homes, LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our recorda Limited Liability Company)	ords.)
•	• • • • • • • • • • • • • • • • • • • •	•
The Articles of Organization for this Limited Liabil	ity Company were filed on March 1, 200	7 and assigned
Florida document number <u>L07000023277</u>	·	
This amendment is submitted to amend the following	ng:	
A. If amending name, <u>enter the new name of the</u>	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the desig	gnation "LLC" or the abbreviation
B. If amending the registered agent and/or r registered agent and/or the new registered office		, enter the name of the new
registered agent under of the new registered order	The state of the s	
Name of New Registered Agent:		08
N. D. I. 1005 A.I.		street address)
New Registered Office Address:	(Enter Florida :	street address)
	(=),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
-		orida R
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:	7
I hereby accept the appointment as registered as the provisions of all statutes relative to the prop	zent and agree to act in this capacity. I ful	rther agree to comply with
the provisions of all statutes retailve to the prope accept the obligations of my position as register	er and complete perjormance of my duties ed agent as provided for in Chapter 608	F.S. Or. if this document is
being filed to merely reflect a change in the regi company has been notified in writing of this cha	stered office address, I hereby confirm the	at the limited liability
	r	
•	(If Changing Registered Agent, Signature	of New Registered Agent)

IMC KOM = IA	nager Ianaging Memb e r		
<u>Title</u>	Name	Address	Type of Action
MGRM	<u>Diane Beebe</u>	4025 Morris Bridge Road Zephyrhills, Florida 33541	Add Remove
			Add Remove
·	·		Add Remove
			Add Remove
· <u>·</u>	,		Add Remove
	<u> </u>		Add Remove
D. If amend	ling any other information, enter o	change(s) here: (Attach additional sheets, if necessary.)	FILED 08 MAR 21 AM ID: 27 SECRETARY OF STATE FLORIDA ITALLAHASSEE FLORIDA
Dated	March 20, 3	2008	
	Greg Beebe	ember or authorized representative of a member Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00