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T. HAMPTON

SEP - 9 2009

EXAMINER

COVER LETTER

•	Corporations			
SUBJECT:	MARKETPLA	CE OF ARCADIA I	LLC	
	Name of Lir	nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are s	ubmitted for filing.		
Please return all corres	spondence concerning this matt	er to the following:		
		JAN A. YELEN, Esq.		
		Name of Person		
		YELEN & YELEN, P.A	\	
		Firm/Company		
	1104	1 Ponce de Leon Boule	evard	
		Address		
	Co	ral Gables, Florida 33	134	
		City/State and Zip Code		
	E-mail address:	velen@yelen-yelen.com (to be used for future annual rep	nort notification)	
For further information	n concerning this matter, please		,	
	I A. YELEN, Esq.	at (305)	445-3721	
AAL.	Name of Person		Daytime Telephone Number	

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

Certificate of Status &

(additional copy is enclosed)

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

From: 3054453961

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARKETPLACE O	F ARCADIA LLC	
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our ability Company)	records.
The Articles of Organization for this Limited Liability Company lorida document numberL07000023286		n 1, 2007 and assigned
his amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	lity company here:	
		
The new name must be distinguishable and end with the words "Limit L.L.C."	ed Liability Company," the	_
Enter new principal offices address, if applicable:		2 9
(Principal office address MUST BE A STREET ADDRESS)		1 8 8
Enter new mailing address, if applicable:	20 Yale	09 SEP -8 PH 2: 22 ハー・アー・アー・アー・アー・アー・アー・アー・アー・アー・アー・アー・アー・アー
(Mailing address MAY BE A POST OFFICE BOX)	Lake Wor	Drive "
	33460	·
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		ords, enter the name of the new
New Registered Office Address:		
	Enter Florida street address	
	City Zip Code	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		•
I hereby accept the appointment as registered agent and agr	ee to act in this capacity.	I further agree to comply with

If Changing Registered Agent, Signature of New Registered Agent

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.

From: 3054453961

08/31/2009 12:10

#267 P.003/003

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				
MGRM	PETER PULITZER	18450 NW 144th Avenue Okeechobee, Florida 34972	Add Remove				
MGRM	PULITZER GROVES, INC.	20 Yale Drive Lake Worth, Florida 33460	. ☑ Add □ Remove				
····			Add Remove				
			Add Remove 				
			Add Remove				
			Add Remove				
D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)					
			SECRETARY OF STATE DIVISION OF CORPORATIONS 09 SEP -8 PM 2: 22				
Dated	July 29, 2009	 }	TE IONS				
		r authorized representative of a member					
MacLean Pulitzer Typed or printed name of signee							

Page 2 of 2

Filing Fee: \$25.00