## 1000024092

(Requestor's Name)					
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(Address)					
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,					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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(Document Number)					
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EXAMINATI



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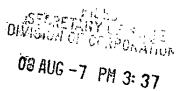
## **COVER LETTER**

	vision of Cor			
SUBJECT:		Floratek Prop	perties, LLC	
SOBJECT.			ited Liability Company)	
The encloses	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspo	ndence concerning this matter	to the following:	
			Patty M. Hoffman	
			(Name of Person)	
	Floratek Properties, LLC			
			(Firm/Company)	
	3948 Sunbeam Road, Suite 8			
			(Address)	
		Ja	acksonville, Florida 32257	
		, .	(City/State and Zip Code)	
For fu <b>rthe</b> r i	nformation c	oncerning this matter, please ca	all:	
	Patty M	I. Hoffman	at ( 904 ) 710-6903	
· · · · · · · · · · · · · · · · · · ·	(Name o	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is	a check for th	e following amount:		
<b>12</b> \$25.00 F	iling 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)
	Registr	ING ADDRESS: ation Section n of Corporations	STREET/COURIER Registration Section Division of Corporation	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



F	loratek Properties, LLC		
(Name of the Limited (A	Liability Company as it now appe Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Lia	ability Company were filed on	February 23, 2007	and assigned
Florida document number L07000024092	······································		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company h	ere:	
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Com	pany," the designation "LLC"	' or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREE)	TADDRESS)		
Enter new mailing address, if applicable:			,
(Mailing address MAY BE A POST OFFICE 1	<u></u>		
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, enter the	name of the new
Name of New Registered Agent:	Patty M. Hoffman		
New Registered Office Address:		Enter Florida street addres	s)
	1.	, Florida	•
	(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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Wayne A. Hoffman	4403 Gentle Knoll Drive, North Jacksonville, Florida 32258	Add Remove
MGR_	Patty M. Hoffman	4403 Gentle Knoll Drive, North Jacksonville, Florida 32258	Add Remove
MGRM	Patty M. Hoffman	4403 Gentle Knoll Drive, North Jacksonville, Florida 32258	Add Remove
			Add Remove
violation is <sup>an</sup> 1995 While Street in			Add Remove
			Add Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_
_			<b>–</b>
	<b>8</b> ~4	/z ¢	<u> </u>
Dated	WA	nember or authorized representative of a member	
		ayne A. Hoffman	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00