

LO70000050577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

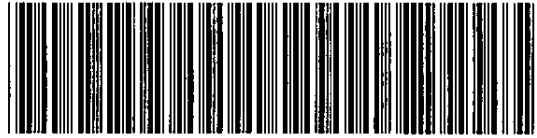
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TALLAHASSEE FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: AMANDA PALMS SOUTH, LLC**  
(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:

**MAIDA MIDEI**  
(Name of Person)

**AMANDA PALMS SOUTH, LLC**  
(Firm/Company)

**14660 MADISON PLACE**  
(Address)

**DAVIE, FLORIDA 33325**  
(City/State and Zip Code)

For further information concerning this matter, please call:

**MAIDA MIDEI** at ( **305** ) **785-4338**  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 20, 2007

MAIDA MIDEI  
14660 MADISON PLACE  
DAVIE, FL 33325

SUBJECT: AMANDA PALMS SOUTH, LLC  
Ref. Number: L07000050577

We have received your document for AMANDA PALMS SOUTH, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 507A00066647

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

07 NOV 29 AM 9:52

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

AMANDA PALMS SOUTH, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on MAY 11, 2007 and assigned document number L07000050577.


**SECOND:** This amendment is submitted to amend the following:

Article II- principal office address and mailing address are hereby changed to 14660 Madison Place, Davie, Florida 33325


Article IV- Registered Agent is hereby changed to Maida Midei 14660 Madison Place, Davie, Florida 33325

Article V - Address of managing member/manager is hereby changed to 14660 Madison Place, Davie Florida 33325

I hereby accept the appointment as registered agent and agree to act in this capacity. I hereby confirm that the limited liability company has been notified in writing of this change,

  
MAIDA MIDEI

Dated NOVEMBER 16, 2007.

  
Signature of a member or authorized representative of a member

MAIDA MIDEI

Typed or printed name of signee

Filing Fee: \$25.00