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J. BRYAN

FEB - 5 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corpo		
SUBJECT:	FESIWAL DEVELOPERS, LLC (Name of Limited Liability Company)	
	(Name of Limited Liability Company)	
The enclosed Articles of Art	mendment and fee(s) are submitted for filing.	
Please return all corresponde	dence concerning this matter to the following:	
_	JOI-IN P NACHEF	
	(Name of Person)	
	(Firm/Company)	
_	555 E ELKCAM CIRCLE (Address)	0 ²
	(Address)	SECR HSIO
-	MARCO ISLAND FL 34145 (City/State and Zip Code)	SECRETARY OF STATE VISION OF CORPORATION OF CORPORA
For further information conc	cerning this matter, please call:	ORATION B: 49
To 1-IN MC	erson) at (239) 6-12-4211 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the fo	ollowing amount:	
\$25.00 Filing Fee	\$30.00 Filing Fee & \$60.00 Filing Fee Certificate of Status Certified Copy Certificate of Certified Copy Certified Copy	Status &

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 ARTICLES OF ORGANIZATION **OF**



Fesitval Developers, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabil	ity Company were filed on <u>07/19/2007</u>	and assigned	
Florida document number <u>L0700074651</u>			
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here:		
FESTIVAL DEVELOPERS, LLC			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation	n "LLC" or the abbreviation	
B. If amending the registered agent and/or registered agent and/or the new registered office		er the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street	address)	
	, Florida	Florida	
_	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered ago the provisions of all statutes relative to the prope	ent and agree to act in this capacity. I further r and complete performance of my duties, and	I am familiar with and	
accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	ered office address, I hereby confirm that the	Or, if this document is limited liability	
	(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 Tit<u>le</u> Name 1 **Address** Type of Action ☐ Add Remove ☐ Remove Add Remove □Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated JANUARY Signature of a member or authorized representative of a member P NACHEY

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00