## L07000081923

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J. BRYAN

APR 15 2008

**EXAMINER** 

## **COVER LETTER**

Division of C			
SUBJECT. Dwellin	gs A Real Estate Comp	any LLC	
SUBJECT:		nited Liability Company)	
	of Amendment and fee(s) are sul	-	• .
Please return all corres	pondence concerning this matter	r to the following:	
	Shawn M McGuire	•	<b>0</b> 0 0 0
		(Name of Person)	8 AF
	Dwellings A Real Es	state Company LLC	
		(Firm/Company)	- CARO
	1606 Walnut Street		OB APR IN PH 3: 50
		(Address)	# 50 High
	Jacksonville, Florida	a 32206	CS CS
		(City/State and Zip Code)	
For further information	concerning this matter, please of	call:	
Shawn M McGuir	re	at ( 904 ) 356-7447	
(Nam	e 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)
Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Dwellings Jacksonville LLC

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

(A Florida Limited Liability Company)

. (A F	lorida Limited Liability Company)	<b>3</b> 35
The Articles of Organization for this Limited Liab	pility Company were filed on August 9, 200	and assigned
Florida document number <u>L07000081923</u>	·	
This amendment is submitted to amend the follow	ving:	
A. If amending name, <u>enter the new name of t</u>	he limited liability company here:	
Dwellings A Real Estate Company LLC The new name must be distinguishable and end with 'L.L.C."	the words "Limited Liability Company," the desig	nation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida s	treet address)
	, , , , , , , , , , , , , , , , , , , ,	rida
	(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

<u>itle</u>	<u>Name</u>	Address	Type of Action
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			Remove
			_
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			Remove
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Filing Fee: \$25.00