## 10700080540

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
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09 AUG -6 AM II: 36

SECRETARY OF STATE

D. BRUCE

AUG 07 2009

**EXAMINER** 

## **COVER LETTER**

Division of C				
SUBJECT:	Eastwind [	Development, LLC		
		ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.		
Please return all corres	spondence concerning this matter	r to the following:		
		Patty Laine		<u>.</u>
		Name of Person		
	Eas	twind Development, LLC		
		Firm/Company		-
	8380	Resource Drive, Suite 1		
	Address			
	Mos	of Dalm Boach El 22404		09 AUG -6 SECRETARY ALLAHASSE
	vves	St Palm Beach, FL 33404 City/State and Zip Code		
	pla	ine@eastwinddev.com		-6 SSE SSE
	E-mail address: (	to be used for future annual report no	otification)	UG-6 AHII ETARY OF SI HASSEE, FLO
For further information	n concerning this matter, please of	call:		AMII: 36 OF STATE E. FLORID.
	Patty Laine	at (_561 )	370-6600	OF 6
Namo	e of Person	Area Code & Day	time Telephone Numbe	er
Enclosed is a check for	r the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	sed) Certifie	ate of Status &
Regi	ILING ADDRESS: stration Section sion of Corporations	STREET/COU Registration Sec Division of Cor		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eastwind I	Development, LLC		
( <u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appear mited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Co.	mpany were filed on	8/23/07	and assigned
Florida document number L0700086546			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company her	<u>'e</u> :	
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Compa	nny," the designation	1 "LLC" or the abbreviatio
Enter new principal offices address, if applicable:			O9
(Principal office address MUST BE A STREET ADDRE	ESS)		
			Size on Tele
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			36 RIDA
B. If amending the registered agent and/or register registered agent and/or the new registered office addre	red office address on o	our records, <u>ente</u>	r the name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street d	address
		, 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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	John F. Weir	8380 Resource Drive, Suite 1 West Palm Beach, EL 33404	Add  Remove
MGRM	John F. Weir	8380 Resource Drive, Suite 1 West Palm Beach, FL 33404	Add Remove
			Add Remove
		N	Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, en	ter change(s) here: (Attach additional sheets, if necessary	FIL 09 AUG -6 SECRETAR
			AMII: 36
Dated	August 3	_,	
	Signature o	f angember or authorized representative of a member	
		John F. Weir	
		Typed or printed name of signee	<del> </del>

Page 2 of 2

Filing Fee: \$25.00