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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
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B. KOHR  
SEP 30 2008  
EXAMINER

FILED  
08 SEP 29 PM 3:45  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BAYTREE TOWNHOMES, 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:

AMY N. HORNE

(Name of Person)

SMITH, THOMPSON, SHAW & MANAUSA PA

(Firm/Company)

3520 THOMASVILLE ROAD FOURTH FLOOR

(Address)

TALLAHASSEE, FL 32309

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

AMY N. HORNE

(Name)

893-4105

(Code & Daytime Telephone Number)

Enclosed is a check for

☒ \$25.00 Filing Fee

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

enclosed)

CF-25

MAILING  
Registration  
Division of  
P.O. Box 6  
Tallahassee

COURIER ADDRESS:  
Section  
Corporations  
Filing

2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

BAYTREE TOWNHOMES, 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 Liability Company were filed on SEPTEMBER 27, 2007 and assigned  
Florida document number L07000099551.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

7156 SHADY GROVE LANE

TALLAHASSEE, FL 32312

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

P.O. BOX 15877

TALLAHASSEE, FL 32317-5877

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

(Enter Florida street address)

(City), Florida

(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>	<u>Address</u>	<u>Type of Action</u>
MGRM	AMB DEVELOPMENT AND CONSTRUCTION, LLC	P.O. BOX 3803 TALLAHASSEE, FL 32315	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	PYRAMID ESTATES, LLC	P.O. BOX 15877 TALLAHASSEE, FL 32317-5877	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 9-23, 2008.



Signature of a member or authorized representative of a member

SUSAN S. THOMPSON

Typed or printed name of signee