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(((H08000158681 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: GARY, DYTRYCH & RYAN, P.A.

Account Number : I19990000255 Phone

: (561)844-3700

Fax Number

: (561)844-2388

## .@'AMND/RESTATE/CORRECT OR M/MG RESIGN

### MILLENNIUM EDITION, LLC

Certificate of Status	0
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Page Count .	01
Estimated Charge	\$25.00

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JUN 25 2008

**EXAMINER** 

Electronic Filing Menu

Corporate Filing Menu

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JUN-24-08 12:19PA		A. 5518442388 CUVER LETTER	T-537 P.002/	1004 F-693 プラオル	<del>?</del> Ι:
TO: Registratio Division of	n Section Corporations			- 000	,, _
SUBJECT: MILL	ENNIUM EDITION, LE	_C			•
		nited Liability Company)			•
The enclosed Article	s of Amendment and fee(s) are sub	omitted for filing.			
Please return all corr	espondence concerning this matter	to the following:			
	LAWRENCE W. SMITH		·		
		(Name of Person)	·		
	GARY, DYTRYCH & RY	'AN, P.A.			
		(Firm/Company)			
	701 U.S. HIGHWAY ON	E, SUITE 402			
		(Address)			
	NORTH PALM BEACH,	FL 33408			
		(City/State and Zip Code)	TAIS	2	•
For further informati	on concerning this matter, please o	eall:		2060 JUR	**************************************
LAWRENCE W. SI		at 561 844-3700	SSE	24	Townson, and the second
(Na	ame of Person)	(Ares Code & Day	dime Telephone Number)	Ġ.	Terminal Control
Enclosed is a check f	for the following amount:		[57]	40	
2 \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee &	☐\$60.00 Filing Fee		

MATLING 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

(additional copy is enclosed)

(CC HO8000/586813)))

Certified Copy

(additional copy is enclosed)

# NT CIC HO GOOD IS ADOL 311)

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number <u>L07000103989</u>		
This amendment is submitted to amend the following:	,	
A. If amending name, enter the new name of the limited liab	ility company here:	
		•
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:	133 U.S. HIGHWAY ONE	
(Principal office address MUST BE A STREET ADDRESS)	ESS) NORTH PALM BEACH, FL 33408	
Enter new mailing address, if applicable:	133 U.S. HIGHWAY ONE	P. 20
(Mailing address MAY BE A POST OFFICE BOX)	NORTH PALM BEACH, FL 3340	Designation of the contract of
	·	
		<i>- 1</i>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		
Tegistered agent andor the new Tegistered office address her	<u>c</u> -	وهو بسيم
		8: 04 01/10 01/10
Name of New Registered Agent:		And the second s
New Registered Office Address:		
	(Enter Florida street	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)

Page 1 of 2

((C#08000/58681 3)))

	12:19PM FROM-Gary, Dytrych & I	Ryan, P.A. 5618442388 I <b>viembers on our records, <u>enter the</u> ni</b> ne,	T-537 P.004/004 F-693
or Managin MGR = Ma	g Member being added or re		((HO800158681 3))
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			Add Remove
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D. If amend	ding any other information, c	nter change(s) here; (Attach additional sh	eets, if necessary SEE OF STATE OF STAT
——Dated <u>JUNE</u>	Signature	of a member or authorized representative of a new terms of a member of a member of a member of a member of signed and the signed and the signed are printed name of signed and the signed are page 2 of 2	nember orizod Peprosontatius/ Registero Asont

Filing Fee: \$25.00 ((C#08600158681 3)))