L07000105973

(Requestor's Name)				
V				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
·				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



000111348630

11/05/07--01062--006 **275.00

PILED

2001 NOV -5 P 2: 4

SECRETARY OF STATE

AL

COVER LETTER

TO: Registration Division of C				
SUBJECT: COVI	ENANT HOSPITAL	ITY, LLC		
<u></u>	- 	imited Liability Company)		
	of Amendment and fee(s) are s spondence concerning this matt	er to the following:		
	ERNEST L. MAS			
		(Name of Person)		
	ERNEST L. MAS	CARA, P.A.		
		(Firm/Company)		
	475 CENTRAL A	VENUE, SUITE 202	IAI TAI	
		(Address)	ZOOT NOV	7
	ST. PETERSBUR	RG, FL 33701	SP 1	
		(City/State and Zip Code)		M
For further information	concerning this matter, please	call:	P 2: 47 OF STATE E. FLORIDA	O
ERNEST L. M		_{at (} 727 ₎ 896-1200		
(Nam	e of Person)	(Area Code & Daytin	ne Telephone Number)	
Enclosed is a check for the	e 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)	

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 TO ARTICLES OF ORGANIZATION OF

COVENANT HOSPITALITY, LLC

(Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on document number L07000105973 and assignment and assignment number and assignment number L07000105973.	ned .				
SECOND:	This amendment is submitted to amend the following: PLEASE DELETE THE FOLLOWING MANAGER/MEMBE	R DETA	ΔII ·			
	TELAGE BELETE THE TOLLOWING WITH TOLLOWING					
	TITLE: MGR					
	NAME: JONES, MICHAEL					
		SECRE	hon your			
		JARY ASSEI	-S P			
		OF SIL	<u> </u>			
		ATE RIDA				
Dated NO	<u>VEMBER 2</u> , <u>2007</u> .					
	Signature of a member or authorized representative of a member		-			
	ERNEST L. MASCARA	·				
	Typed or printed name of signee					

Filing Fee: \$25.00