

JUL 01-2014 TUE 10:37 AM
Division of Corporations

FAX NO.

P. 01

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LO7000117277

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SMITH HULSEY & BUSEY
Account Number : 075030000653
Phone : (904) 359-7700
Fax Number : (904) 359-7708

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mterk@floridaprostate.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ELEVENTH CITY LANDOWNERS, LLC

Certificate of Status	0
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14 JUL - 1 AM 10:43

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TALLAHASSEE, FLORIDA

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14 JUL - 1 AM 7:47

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Eleventh City Landowners, 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:

Mitchell D. Terk, M.D.

Name of Person

Eleventh City Landowners, LLC

Firm/Company

7017 AC Skinner Parkway

Address

Jacksonville, FL 32256

City/State and Zip Code

mterk@floridaprostate.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mitchell D. Terk, M.D.

Name of Person

at 904 520-6800

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)

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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Eleventh City Landowners, LLC

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

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The Articles of Organization for this Limited Liability Company were filed on November 21, 2007 and assigned
Florida document number L07000117277

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:

710-1 Lomax Street

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

Jacksonville, Florida 32204

Enter new mailing address, if applicable:

7017 AC Skinner Parkway

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

Jacksonville, Florida 32256

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 605, 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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Mitchell D. Terk	7017 AC Skinner Parkway	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32256	<input type="checkbox"/> Remove
MGR	Shyam B. Paryani	3599 University Boulevard South, Suite 907	<input type="checkbox"/> Add
		Jacksonville, FL 32216	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 30, 2014.



Signature of a member or authorized representative of a member

Mitchell D. Terk, M.D.

Typed or printed name of signer

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Filing Fee: \$25.00

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