L07000/20250

(Paguastor's Nama)	
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone	#)
PICK-UP WAIT	MAIL
(Business Entity Nam	ne)
(Document Number)	
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EXAMINER

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06/09/08--01035--004 **25.00



COVER LETTER

	ration Section on of Corporations	
SUBJECT: _	North Grande Beach Drive, LLC	
SOBJECT	(Name of Limited Liability Company)	
The enclosed	ticles of Amendment and fee(s) are submitted for filing.	
Please return a	correspondence concerning this matter to the following:	
		<u>'</u>
	James W. Pzinski	
	(Name of Person)	
	(Firm/Company)	
36468 Emerald Coast Pkwy, Suite 1201		7000
	(Address)	
(Address) Destin, FL 32541		
	(City/State and Zip Code) (City/State and Zip Code) (City/State and Zip Code) (City/State and Zip Code)	to <u>m</u>
For further info	FILED 調 JM -9 P #: 22	
	Jim Pzinski at (850) 337-4242	
(Name of Person) (Area Code & Daytime Telephone Number		1
Enclosed is a ch	ck for the following amount:	
X \$25.00 Filing	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	of Status &
	MAILING ADDRESS: Registration Section Registration Section Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

North Grande Beach Deive, 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 Florida document number 407000/20		and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	limited liability company here:	ZOOR J
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," .	the designation "EEC" or the abbreviation
Enter new principal offices address, if applicable	<u> </u>	
(Principal office address MUST BE A STREET A	DDRESS)	U 1 23
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	_	records, enter the name of the new
Name of New Registered Agent:		
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 amending the Managers or Managing Members on our records, enter the title, name, and address of or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Title **Name** <u>Address</u> Type of A MGR 36468 Emerald Coast Parkway Suite 1201 DbA □ Destin Title Exchange Co. Remove . Destin. FL 32541 MGRM James A. Cochran 136 South Holiday Road Add 🔀 Remove Miramar Beach, FL 32550 Add Remove Remove Ädd Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article II, Street and Mailing Address 136 South Holiday Road Miramar Beach, FL 32550 2008 May 15, Dated_ Destin Title Exchange Company, LLC Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 2 of 2
Filing Fee: \$25.00

James W. Pzinski, Mgr.

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