L07000 [21 [6]

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SECRETARY OF STATE

D. BRUCE

FEB 0 1 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: DMD R	esidential Properties, L	LC		
	(Name of Lin	nited Liability Company)		
	f Amendment and fee(s) are su ondence concerning this matte	_		
	Grant T. Downing	(Name of Person)		
		, ,		
	Godbold, Downing,	Sheahan & Bill, P.A. (Firm/Company)		
	222 W. Comstock A	venue, Suite 101		
		(Address)	SEC	80
	Winter Park, FL 327		AHA	
		(City/State and Zip Code)	SSEE	_
For further information	concerning this matter, please	call:	OF S	3 m
Grant T. Downing	of Person)	at (407) 647-4418	DRIDA DRIDA	<u> </u>
(Hane	or reasony	(Area Code & Daytime	retephone Number)	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy	

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

DMD Residential Properties, 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 Liab	ullity Company were filed on December	r 5, 2007 and assigned	
•	my company word modern <u>Decertifical</u>	and 1001g1100	
Florida document number <u>L07000121161</u>	,	As o	
		SEC SEC	
This amendment is submitted to amend the follow	ina		
This afficience is submitted to afficile the follow	nig.	ASA I	
		SEX -	
A. If amending name, enter the new name of the	<u>ie limited liability company here:</u>		
		S	
The same and he distinguished and with a	L		
The new name must be distinguishable and end with t "L.L.C."	ne words Limited Liability Company, the	designation but the appreviation	
3.3.0.			
B. If amending the registered agent and/or	•	rds, enter the name of the nev	
registered agent and/or the new registered offic	<u>e address here</u> :		
Name of New Registered Agent:			
Traine of frew Registered Figure.			
New Registered Office Address:			
	(Enter Florida street address)		
	771 41		
	(City)	, Florida(Zip Code)	
	(Cuy)	(Zip Code)	
New Registered Agent's Signature, if changing Reg	istered Agent:		
I hereby accept the appointment as registered a	ovent and agree to act in this capacity	I further garee to comply with	
the provisions of all statutes relative to the pro	per and complete performance of my di	ities and I am familiar with and	
accept the obligations of my position as registe	red agent as provided for in Chapter 6	08. F.S. Or. if this document is	
being filed to merely reflect a change in the reg	sistered office address, I hereby confirm	that the limited liability	
company has been notified in writing of this ch	ange.		
- -			
	(If Changing Registered Agent, Signat	ure 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 Type of Action **Address** Title Name ☐ Add Remove Add Remove Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article II is hereby amended to change the mailing and principal address of the limited liability company to: 2000 East State Road 434 Winter Springs, Florida 32708 Dated_January 2008 Signature of a member or authorized representative of a member Dean A. Burleson, Managing Member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00