

**L07000123665**

Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6383

**L. SELLERS**

DEC 29 2008

From: Account Name : FLORIDA INCORPORATORS, INC.  
Account Number : 075350000473  
Phone : (813)632-7882  
Fax Number : (305)402-3141

**EXAMINER**

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**6390 FALCON LAIR LLC**

Certificate of Status	0
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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

6390 FALCON LAIR, 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 Company were filed on DECEMBER 13, 2007 and assigned  
Florida document number L07000123665

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: 310 WHITFIELD AVENUE  
SARASOTA, FL 34243  
*(Principal office address MUST BE A STREET ADDRESS)*

Enter new mailing address, if applicable: 310 WHITFIELD AVENUE  
SARASOTA, FL 34243  
*(Mailing address MAY BE A POST OFFICE BOX)*

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: Florida Incorporators, Inc.

New Registered Office Address: 8875 Hidden River Parkway, Suite 300  
*(Enter Florida street address)*  
Tampa, Florida 33637  
*(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.*

[Signature]  
(If Changing Registered Agent, Signature of New Registered Agent)

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ROBERT HARRIS	875 DOG KENNEL ROAD SARASOTA FL 34240	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	DEREK TAACA	310 WHITFIELD AVENUE SARASOTA FL 34243	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Dated

June 27, 2008

Signature of a member or authorized representative of a member

DEREK TAACA

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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