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**EXAMINER** 

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## **COVER LETTER**

TO:	Registration Section Division of Corpo			
SUBJI	7 <b>CT</b> •	Carthage	Properties, LLC	
5000			ted Liability Company	<del></del>
The en	closed Articles of Ar	mendment and fee(s) are sub	omitted for filing.	
Please	return all correspond	lence concerning this matter	to the following:	
•			Catherine H. Lorié	
			Name of Person	
			Firm/Company	
			133 Sevilla Avenue	
			Address	<del></del>
		C	oral Gables, FL 33134	<del></del>
		lo	City/State and Zip Code  rie@apachecap.com  o be used for future annual report notifica	offen)
For fur	ther information con	cerning this matter, please c		inon)
	Cathe	rine H Lorié	at ( 305 ) 285-5	588 ext 5726
Name of Person			Area Code & Daytime	Celephone Number
Enclose	ed is a check for the	following amount:		
<b>□</b> \$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:		STREET/COURIE	R ADDRESS:	

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Carthage Pro 1 Liability Compar 4 Florida Limited L	perties, LLC ny as it now appears of iability Company)	n our records.)		_	
The Articles of Organization for this Limited L Florida document number L0700012		were filed onDec	ember 14, 20	<u>07</u> and	d assig	ned
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company here:				
		Management LLC				
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ted Liability Company	" the designation	"LLC" or	the abl	breviatio
Enter new principal offices address, if applie	133 Sevilla Ave	nue				
(Principal office address MUST BE A STREE	Coral Gables, F	lorida 33134				
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)  B. If amending the registered agent and registered agent and/or the new registered of	or registered of		lorida 33134	the nan	ne of	the nev
Name of New Registered Agent:	Catherine H	Lorie		3S	<u>۔۔،</u>	
New Registered Office Address:	133 Sevilla	Avenue		255	35	
New Registered Office Address.		Enter	Florida street ad	(2)	<u>~</u>	CORRE
Coral Gable			, Florida _	Zip (	3134	M
City  New Registered Agent's Signature, if changing Registered Agent:					~e2: 4 6	
I hereby accept the appointment as registered the provisions of all statutes relative to the paccept the obligations of my position as region being filed to merely reflect a change in the	proper and complistered agent as p	lete performance of provided for in Chap	my duties, and I oter 608, F.S. Or	l am fami r, if this c	iliar w docum	vith and nent is

Page 1 of 2

If Changing Registered Agent, Signature of New Registered Agent

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 each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Address Type of Action Title** <u>Name</u> MGRP Richard C. Dennis 133 Sevilla Avenue ☐ Add Remove Coral Gables, Florida 33134 ☐ Add ☐ Remove ☐ Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 8, 2010 Signature of a member or authorized representative of a member

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Filing Fee: \$25.00