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PICK-UP	WAIT MAIL					
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Special Instructions t	o Filing Officer					
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Office Use Only

JUN - 9 2009

EXAMINER



900156499909

06/05/09--01038--010 **60.00

COVER LETTER

то:	Registration Sec Division of Corp			
SUBJE	ест: <u>URP</u>	Name of Limit	TAMPA, LLC ted Liability Company	
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	dence concerning this matter	to the following:	
		MARVIA	MEEKS Name of Person	
		URBAN LI	VING (AMA Firm/Company	
•		101 N 1	27th S7 #102	ZOOO JUN SECRET TALLAHA
		TAMPA	Address	ARY & I
		Mar Vin Q U	cban I lying tampa. com o be used for future annual report notification)	AM 10: 49 OF STATE E. FLORID/
For fur	ther information co	ncerning this matter, please c	all:	
<u> </u>	Name of		at (\$13) \$71 - 08 Area Code & Daytime Teleph	
Enclose	ed is a check for the	e 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)
		NG ADDRESS:	STREET/COURIER AD Registration Section	DRESS:

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 OF

URBAN LIVI	36-TAM	DA, LLC		9
(Name of the Limited L (A F	lability Company a lorida Limited Liabi	it now appears on ou ity Company)	r records.)	TSEC T
The Articles of Organization for this Limited Liab		e filed on $\frac{1}{3}$	12008	and assigned
Florida document number LOSOCOC	<u> 2671</u> .			SEE.
This amendment is submitted to amend the follow				AM 10: 49
A. If amending name, enter the new name of t				**
The new name must be distinguishable and end with	PA Bay F	REAL ESTA-	TE, L	
The new name must be distinguishable and end with "L.L.C."	the words "Limited I	Liability Company," the	designation '	'LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:	101 N.	127 3	3360Z
(Principal office address MUST BE A STREET	ADDRESS)	TAMPA	FC	33602
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE B</u> O	<u></u> <u>0x)</u>	IOI N. TAMPA	12 TH	ST #102 33602
B. If amending the registered agent and/or registered agent and/or the new registered office	ce address here:		ords, <u>enter</u>	the name of the new
Name of New Registered Agent:	MARVIN	MEEKS		
New Registered Office Address:	101 N. 1	2TH ST #1	02	
	 -		rida street ad	dress
	TAMPA		_, Florida _	3360 <u>2</u> Zip Code
	C	iy		г ір Соае

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, a hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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>Address</u> Type of Action Title Name ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARVIN MEEKS Dated Signature of a member or authorized representative of a member MARVIN Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00