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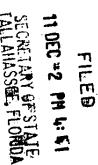
(Re	questor's Name)				
(Ad	dress)				
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DEC **2** SOII

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	LAUREL COURT ASSOCIATES LLC			
30 131	Name of Limited Liability Company			
The en	closed Articles of Amendment and fee(s) are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	JAN HEFLINGER			
	Name of Person			
	Picerne Development Corporation			
Firm/Company				
	247 N WESTMONTE DR			
	Address			
ALTAMONTE SPRINGS, FL 32714				
	City/State and Zip Code			
	JHEFLINGER@PICERNEFL.COM E-mail address: (to be used for future annual report notification)			
For fur	ther information concerning this matter, please call:			
	JAN HEFLINGER at (407) 772-0200 EXT 132 Name of Person Area Code & Daytime Telephone Number			
Enclos	ed is a check for the following amount:			
\$25	.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}			

MAILING ADDRESS:

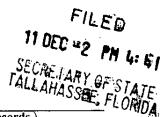
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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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



LAUREL COURT ASSOCIATES LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for	r this Limited Liability Company	were filed on	02/12/2008	and assigned
Florida document number	L08000015309			
This amendment is submitted to	amend the following:			
A. If amending name, enter the	he new name of the limited liabi	ility company here	:	
The new name must be distinguish "L.L.C."	nable and end with the words "Limit	led Liability Compan	y," the designation "L	LC" or the abbreviation
Enter new principal offices ad	dress, if applicable:			
(Principal office address MUS)	T BE A STREET ADDRESS)			·
			<u> </u>	
Enter new mailing address, if	applicable:			
(Mailing address MAY BE A P	OST OFFICE BOX)			
	ed agent and/or registered off w registered office address here		ir records, <u>enter t</u>	ie name of the new
Name of New Register	red 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.

It 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>	Address	Type of Action					
<u>GP</u>	ROBERT M PICERNE	247 N WESTMONTE DR ALTAMONTE SPRINGS, EL 32714	Add Remove					
MGRM	Picerne Laurel Court LLC	247 N WESTMONTE DR ALTAMONTE SPRINGS, FL 32714	✓ Add ☐ Remove					
			Add Remove					
			Add Remove					
			Add Remove					
			Add Remove					
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)								
			-					
			-					
Dated	NOVEMBER 16th , 201	1	_					
-	Signature of a member or authorized representative of a member							
	ROBERT M PICERNE Typed or printed name of signee							

Page 2 of 2

Filing Fee: \$25.00