108000018439

(Requestor's Name)
(Address)
(Address)
(riddless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodificht Maribel)
•
Certified Copies Certificates of Status
<u>-</u>
Special Instructions to Filing Officer:
1
·

Office Use Only



600118518416

02/25/08--01021--009 **25.00

08 FEB 25 PM 2: 59
SECRETARY OF STATE
SECRETARY FLORIDA

COVER LETTER

TO: Registration So Division of Con				
SUBJECT: 715 N, N	MACEWEN, LLC			
	(Name of Lim	ited Liability Company)	 	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	JOHN W. PERSSE			
	JOHN W. PERSSE	(Name of Person)	 	
	JOHN W. PERSSE,	ATTORNEY AT LAW, CHAR (Firm/Company)	TERED	
	1800 SECOND STR			
		(Address)	08	
	SARASOTA, FL 34	236	SECT SECT)) -r1.
		(City/State and Zip Code)	AHAS CO	光点
For further information of	concerning this matter, please c	all:	'elephone Number)	PH 2:
JOHN W. PERSSI		at (941) 366-7589		59
(Name	of Person)	(Area Code & Daytime T	`elephone 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)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons r Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L (A F	iability Company as it now appears on o lorida Limited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liab	bility Company were filed on FEBRU	ARY 20, 2008 and assigned	
Florida document number <u>L08000018439</u>			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company here:		
715 N. MACEWEN, LLC		e e	
715 N. MACEWEN, LLC The new name must be distinguishable and end with "L.L.C." B. If amending the registered agent and/or	registered office address on our re	至 25	
registered agent and/or the new registered offic	ce address nere:	2:59 FLORIDE	
Name of New Registered Agent:			
New Registered Office Address:	(Esten El		
	(Enter Florida street address)		
	(0:1)	, Florida	
	(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent:

715 N, MACEWEN, LLC

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.

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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_
			08 FEB 25 P
Dated FEB	Resord	or authorized representative of a member	PH 2:59
	JOHN W. PERSSE	or printed name of signee	
	I ypea o	of printed hand of signee	

Page 2 of 2

Filing Fee: \$25.00