## L08000032424

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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SECNE LARY OF STATE ON SHIVISION OF CORPORATIONS

J. BRYAN

JUN 17 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration So Division of Cor			
SUBJECT: Provide	ence at Zephyr Ridg		
•	(Name of Lim	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Richard A. Burt		80 Sec
		(Name of Person)	JUN OFFICE
	Burt & Burt, P.L.		- 6 CAN
		(Firm/Company)	7 P P ON
	109 E. Church Street, 5tl	n Floor (Address)	OB JUN 16 PH 4: 08
	Orlando, Florida 32802	(City/State and Zip Code)	
For further information c	oncerning this matter, please c	all:	
Richard A. Burt		at ( 407 ) 420-6828	
	of Person)	(Area Code & Daytime 1	elephone Number)
Enclosed is a check for the	ne 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)

MAILING ADDRESS:

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

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



Providence at Zephyr Ridge, 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 Lia	ability Company	were filed on 3/03/20	08 and assigned
Florida document number L08000022424	·		
This amendment is submitted to amend the follo		114	
A. If amending name, enter the new name of	the limited hab	ompany nere:	
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applica	ble:	1275 Lake Heathro	w Lane
(Principal office address MUST BE A STREET ADDRESS)		Suite 101	
		Heathrow, Florida 3	2746
Inter new mailing address, if applicable:		1275 Lake Heathro	w Lane
(Mailing address MAY BE A POST OFFICE E	<u> </u>	Heathrow, Florida 3	2746
B. If amending the registered agent and/o registered agent and/or the new registered off	_		records, <u>enter the name of the new</u>
Name of New Registered Agent:			
New Registered Office Address:	1275 Lake He	eathrow Lane, Suite 10 (Enter	1 Florida street address)
	Heathrow		, Florida <u>32746</u>
		(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.

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:

	<u>Name</u>	<u>Address</u>	Type of Ac
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		r change(s) here: (Attach additional sheets, if n	ecessary.)

Page 2 of 2

Filing Fee: \$25.00