L08000023831

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(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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B. KOHR
MAR 1 1 2008

EXAMINER





ACCOUNT NO. : 072100000032

REFERENCE: 47986

7119733

AUTHORIZATION C

COST LIMIT : \$ 25

ORDER DATE: March 10, 2008

ORDER TIME : 5:22 PM

ORDER NO. : 479865-010

CUSTOMER NO: 7119733

DOMESTIC AMENDMENT FILING

NAME: SUNSPREE BUENA VISTA, LLC

XX __ ARTICLES OF AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunspree Buena Vista, LLC

(Name of the Limited Linbility Company as it now appears on our records.)

(A Flori	da Limited Liability Company)	RICE
The Articles of Organization for this Limited Liability	y Company were filed on March 7, 2008	and assigned
Florida document number L08000023831		
This amendment is submitted to amend the following	; :	
A. If amending name, enter the new name of the l	limited liability company here:	•
Sun Buena Vista, LLC		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designa	tion "LLC" or the abbreviation
registered agent and/or the new registered office a Name of New Registered Agent:	radiess neie.	
New Registered Office Address:	(Enter Florida stre	eet address)
	(,
	, Floria	da(Zip Code)
	(City)	(Zip Colle)
New Registered Agent's Signature, if changing Regist	ered Agent:	
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist	r and complete performance of my duties, a d agent as provided for in Chapter 608, F.S	and I am familiar with and S. Or, if this document is

(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 = Manager

<u>tle</u>	Name	Address	Type of Actio
			C Remove
			Add Remove
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			Add
		-	□ Remove
			□ Add □ Remove
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If amendi	ng any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	_
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ted March 1	0 , 200	08	
_		nber or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00