L08000032054

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T. HAMPTON

APR 28 2008

EXAMINER

COVER LETTER

10:	Division of Corp			
SUBJE	CT:	DIAMOND	VERDE 2305, LLC	
,	•		nited Liability Company)	
The end	closed Articles of A	mendment and fec(s) are sub	omitted for filing.	
Please 1	return all correspon-	dence concerning this matter	to the following:	
		Maria E. Gor		
			(Name of Person)	
		MG TITLE SERV	VICES, INC. (Firm/Company)	
		8301 Coral Wa	(Address)	
		Miami, F do rida	33155	
F 6	Lauria Carra da		(City/State and Zip Code)	
ror turt	ner information cor	nceming this matter, please c		
	Maria (Name of	Person)	at (305) 261-4550 (Area Code & Daytime	Telephone Number)
Enclose	ed is a check for the	following amount:		
X \$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)
	Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 see, FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DIAMOND VERDE 2305, LLC

(<u>Name of the Limited L</u> (A F	liability Company as it now apported to limited Liability Company	ears on our records.)	<i></i>
The Articles of Organization for this Limited Liab Florida document number L08000032054	bility Company were filed on	March 28, 200	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, <u>enter the new name of t</u>	he limited liability company h	<u>iere</u> :	
The new name must be distinguishable and end with "L.L.C." B. If amending the registered agent and/or registered agent and/or the new registered office.	registered office address or		
Name of New Registered Agent:			
New Registered Office Address:		Enter Florida street (iddress)
		, 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.

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

CRM CECILIA MALHOTRA 4779 Collins Avenue, #2305 Add Nismi. Reach, Florids 33141 Remove Add Remove	MGRM = Managing Mon	nber	
Plant Beach Florida 33141 Remove Add Remove	Title Name	Address	Type of Action
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	RM CECILIA	MALHOTRA 4779 Collins Avenue, #2305 Mismi Beach, Florids 33141	
D. If amanding any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
D. If amanding any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 4/22/08			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
Dated 4/22/08	<u> </u>		
Dated 4/22/08	D. If amending any other	information, enter change(s) here: (Attach additional sheets, if nec	08 APR
Dated 4/22/08			
Signature of a member of authorized conceentative of a member			0
MARIO PUCCIONE	Dated 4/22/08	les son	9

Filing Fee: \$25.00