## #108000036894

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K. SALY EXAMINER OCT 6 2011 Erin J. Shaw 404.974.3484 direct eshaw@tpclg.com

October 4, 2011

Dear: Florida Department of Sectary of State

Enclosed please find the amendment and reinstatement documents for Ocean Sands
Properties, LLC. Please Feder book the Jawas in prepaid

Please do not hesitate to contact me if you need anything at all. Thank you.

Best regards,

Assistant to Christopher T. Graham, Esq.

## **COVER LETTER**

TO:

**Registration Section** 

P.O. Box 6327 Tallahassee, FL 32314

Division of Co	rporations		,
SUBJECT:	Ocean San	ds Properties, LLC	
		ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Erin Shaw	
		Name of Person	
	The	Private Client Law Group	
		Firm/Company	
	75 14th Street, Suite 2710		
		Address	
		Atlanta, GA 30309	•
	- 1000 (0)	City/State and Zip Code	<del></del>
•	E-mail address: (	eshaw@tpclg.com to be used for future annual report notification	n)
For further information	concerning this matter, please of	call:	
	Erin Shaw	at ( 404 ) 974	· -3484
Name	of Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis	LING ADDRESS: tration Section ion of Corporations	STREET/COURIER A Registration Section Division of Corporation	

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

FILED
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TATUMINATE OF STATE

Ocean Sands F (Name of the Limited Liability Compa (A Florida Limited L	Properties, LLC  ny as it now appears on our reco Liability Company)	Ords.)
The Articles of Organization for this Limited Liability Company	were filed on4/11/20	008 and assigned
Florida document numberL08000036894		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Glass Sand Pro	pperties, LLC	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	75 14th Street	
(Principal office address MUST BE A STREET ADDRESS)	Suite 2710	
•	Atlanta, GA 30309	
Enter new mailing address, if applicable:	75 14th Street	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 2710	
	Atlanta, GA 30309	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>e</u> :	enter_the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		rida
	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

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 MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
	· · · · · · · · · · · · · · · · · · ·		Add Remove	
			Add Remove	
D. If amend	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)		
_			_	
_				
Dated	,		_	
	Signature of a membe	r or anthorized representative of a member		
	Tyned	Erin Shaw	<del></del>	

Page 2 of 2

Filing Fee: \$25.00