## 08000036960

| (Danuarte da Nierra)                    |
|---|
| (Requestor's Name)                      |
|   |
| (Address)                               |
| •                                       |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Dusiness Linky Name)                   |
|   |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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04/25/08--01022--007 \*\*25.00

J. BRYAN

APR 2 8 2008

**EXAMINER** 

## **COVER LETTER**

| TO:                                   | Registration So<br>Division of Co |  |  |   |                            |
|---------------------------------------|-----------------------------------|--|--|---|----------------------------|
| SUBJE                                 | CT: AHDPFI                        | L DEV 3 LLC                                |  |   |                            |
|                                       |                                   | (Name of Limi                              | ted Liability Company)   |   |                            |
| The end                               | losed Articles of                 | Amendment and fee(s) are sub-              | mitted for filing.   |   |                            |
| Please r                              | eturn all correspo                | ondence concerning this matter             | to the following:  |   |                            |
|                                       |                                   | Francesca Giannini                         | (Name of Bassa)  |   |                            |
|                                       |                                   |  | (Name of Person)   |   |                            |
|                                       |                                   | AHDPFL DEV 3 LLC                           |  |   | a 4                        |
|                                       |                                   |  | (Firm/Company)   |   | SEC<br>VISIO               |
| 8620 South Tamiami T                  |                                   |  |  |   | SECRETARY<br>NVISION OF CO |
|                                       |                                   |  | (Address)  |   | ORPOS<br>CORPOS            |
|                                       |                                   | Sarasota, Florida 34                       | 238  |   | OR AT                      |
|                                       |                                   |  | (City/State and Zip Code)  | <del>-</del>  | F CORPORATIONS 25 PM 27 34 |
| For furt                              | her information o                 | concerning this matter, please ca          | ıll:   |   |                            |
| Francesca (Name of Person)            |                                   | of Person)                                 | at ( 941 ) 918-4300 ext 105 (Area Code & Daytime Telephone Number) |   |                            |
|                                       | (Name                             | or reison)                                 | (Alea Code & Dayline   | reteptione (valueer)  |                            |
| Enclose                               | ed 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<br>Certificate of St<br>Certified Copy<br>(additional copy | atus &                     |
| MAILING ADDRESS: Registration Section |                                   |  | STREET/COURIER Registration Section                                | R ADDRESS:  |                            |

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| AHDPFL DEV 3 LLC (Name of the Limited Liab (A Flor   | oility Company as it now appears on idea Limited Liability Company) | our records.)                                 |  |
|--|---|---|--|
| The Articles of Organization for this Limited Liabili  | ity Company were filed on April 1                                   | 1, 2008 and assigned                          |  |
| Florida document number <u>L08000036960</u>  | ·   | 80<br>St. St. St. St. St. St. St. St. St. St. |  |
| This amendment is submitted to amend the followin  | g:  | NISION OF CO.                                 |  |
| A. If amending name, enter the new name of the   | limited liability company here:                                     | RPORATE                                       |  |
| The new name must be distinguishable and end with the "L.L.C."  B. If amending the registered agent and/or registered agent and/or the new registered office | egistered office address on our                                     |   |  |
| Name of New Registered Agent:  |   | <del></del>                                   |  |
| New Registered Office Address:   | w Registered Office Address:  (Enter Florida street address)        |   |  |
| _  | , 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)

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:

MGR = Manager

MGRM = Managing Member <u>Title</u> Name **Address Type of Action** MGR\_ **REY ORTEGA** 8620 South Tamiami Trail, Suite N-P **√** Remove Sarasota, Florida 34238 CJH HOLDINGS LLC MEM 5 Legacy Court Hilton Head, SC 29926 **✓** Add ☐ Remove <u>MEM</u> GEORGE STRICKLAND 8620 South Tamiami Trail, Suite N-P Sarasota, Florida 34238 Remove Add Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated April 21 Signature of a member or authorized representative of a member Alessandro A. Giannini Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00