# Electronic Filing Cover Sheet

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(((H080001930143)))



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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

(CLEARWATER) MACFARLANE FERGUSON & MCMULLEN

Account Number : 071005001001

Phone Pax Number (727) 441-8966

### (727) 442-8470

# LLC AMND/RESTATE/CORRECT OR M/MG RISERYAN

# SONOMA PARTNERS, LLC

Certificate of Status	1
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OCT -8 2008

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August 13, 2008

FLORIDA DEPARTMENT OF STATE

MACFARLANE FERGUSON & MCMULLEN (CLEARWATER)

SUBJECT: SONOMA PARTNERS, LLC

REF: L08000038677

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

FAX Aud. #: H08000193014 Letter Number: 708A00045787

PECEIVED 08 OCT -7 PH 3: 39 ALAHASSEE, F. SHIE Registration Section

TO:

# **COVER LETTER**

Division of Co	rporations		
SUBJECT: Sonom	na Partners, LLC		
		ited Liability Company)	<del></del>
•			
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:	
			08 OCT
	Thomas C. Nash, II		2
		(Name of Person)	•
•	Macfarlane Ferguson &	McMullen, P.A.	··
		(Firm/Company)	•
	625 Court Street, Suite 2	200	
		(Address)	•
	Clearwater, Florida 3375	<b>6</b>	
		(City/State and Zip Code)	
For further information	concerning this matter, please c	all:	
Thomas C. Nash, II		at ( 727 ) 441-8966	
(Name	of Person)	(Area Code & Daytime 1	elephone Number)
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	2\$30.00 Filing Fee & Certificate of Status	Cartified Copy (additional copy is enclased)	Certificate of Status & Certificate 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

(Name of the Limited	Lighility Compar	ay as it now appears	on our records.	
(/	A Florida Limited L	iability Company)	OC OF	
The Articles of Organization for this Limited L	iability Company	were filed on April	17, 2008 and assigneds	
Florida document number L08000038677			7.	
Plonda document number			五 2	
This amendment is submitted to amend the follows:	lowing:		on our records.  17, 2008 and assigned.	
A. If amending name, enter the new name of	of the limited liab	ility company here		
· · · · · · · · · · · · · · · · · · ·			•	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ited Liability Compan	y," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		825 Parkway Street, Suite 4		
(Principal office address MUST BE A STRE	ET ADDRESS)	Jupiter, Florida 3	3477	
Enter new mailing address, if applicable:		825 Parkway Str	eet, Suite 4	
(Mailing address MAY BE A POST OFFICE BOX)		Jupiter, Florida 3	Jupiter, Florida 33477	
B. If amending the registered agent and	l/or registered of	Mice address on o	ur records, enter the name of the new	
registered agent and/or the new registered	office address her	<u>re</u> 1		
Name of New Registered Agent:	Thomas C. N	ash, II		
<del></del>				
New Registered Office Address:	625 Court Street, Suite 200 (Enter Florida street address)			
	<b>.</b>	(4377	•	
	Clearwater	(Ctty)	, Florida 33756 (Zip Code)	
		, ,	(Lip Code)	
New Registered Agent's Signature, if changing	Keristered Agent	<u>:</u>		
I hereby accept the appointment as registered the provisions of ell statutes relative to the pr accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this c	oper and complete lered agent as prov egistered office attl	performance of my d id <u>ed for M</u> <b>Captor</b> (	utles, and I of footblar with and 508, F.S. Of it this document is	

Page 1 of 2

MGR = Manager

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> Fitle</u>	Name	Address	Type of Action
	P.I. Holdings No. 1		Add    Remove
MGMR	191 II Landmark Holdings, LLC	825 Parkway Street, Suite 4 Junter, Florida 33477	Rismtove St
	<u>,</u>		Add F
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter chan	ge(s) here: (Attach additional she	ets, if necessary.)
Dated August		- N	7
	Signature of a member Thomas C. Nash. i)	or sulfrantzad Systemative of a modern	2

Page 2 of 2 Filing Fee: \$25.00