

## Florida Department of State

Division of Corporations Public Access System

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Account Name : RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL P.A. (ST.

Account Number : 076077001601 Phone

: (727)502-8200

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

#### LC HOME, LLC

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Ruden, McClosky, Smith, Schuster & Russell, P.A. 150 Second Avenue North St. Petersburg, Florida 33701 (727) 502-8200 Main Office (727) 502-8282 Main Fax

## **Fax Cover Sheet**

To:

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Company:

FLORIDA DEPARTMENT OF STATE

Date:

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Susan G. Sherman, Certified Paralegal to David Bernstein

Direct Phone:

727-502-8243

Direct Fax:

727-502-8943

Client:

26643

Matter:

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(((H08000125882 3)))08 MAY -9 AM 8: 21

SECRETARY OF STATE
TALLAHASSEE FLORIDA

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LC HOME, LLC

(Name of the Limited Liability Company as it now someon on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filled on 94/22/2008 \_\_\_\_\_ and easigned

Florida document number 108000040303 \_\_\_\_\_

This amendment is submitted to amend the following:

A. If amending name, gater the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

B. If amending the registered agent and/or registered office address on our records, anter the name of the new restricted agent and/or the new resistered office address here:

Name of New Registered Agent:

New Registered Office Address:

(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)

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MGR = Manager

### (((H08000125882 3)))

If amending the Managers or Managing Members on our records, gater the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM - Managing Member Title Name Address Type of Action Add Remove **MGRM** Allen D. Conner 3390 Gandy Bouleyard St Petersburg FL 33702 **MGRM** Nancy L. Bowen 3390 Gandy Boulevard St. Patersburg, Fl. 33702 □ Add Remove MGRM MGRM Herbert M. Conner. Jr. 3390 Gandy Bouleyard St Petersburg FI 33702 Remove MGR\_ Allen D. Conner 3390 Gandy Boulevard St. Petersburg, FJ, 33702 Remove MGR\_ 3390 Gandy Boulevard St. Petersburg, FL 33702 **Z**ladd Nancy L. Bowen Remove MGR Herbert M. Conner, Jr. 3390 Gandy Boulevard St. Petersburg, FL 33702 **₹** Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Ξ ထ္ Dated\_ N Signature of a member or authorized repredentative of a member DAVID S. BERNSTEIN, Attorney for LC HOME, LLC
Typed or printed name of signes

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