2 -L08000050761

(Requestor's Name)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
DEC - 8 2009
EXAMINER

1

Office Use Only



12/07/09--01063--001 **200.00

Sec. 19. 19.

2朝9 DEC -7 PH 12:37

TO: Registration S Division of Co			
SUBJECT:	MYAKKA	LANDING, LLC	
		ited Liability Company	
	f Amendment and fee(s) are supondence concerning this matter	-	
		Thomas C. Tyler, Jr.	
		Name of Person	
	Th	omas C. Tyler, Jr., P.A.	
		Firm/Company	FA:
735 East Venice Avenue, Suite 200			TALLAHAS
		Address	
		/enice, Florida 34285	
	,	City/State and Zip Code	PHI2: 37
	GAPE	EMAIL@NETSCAPE.NET to be used for future annual report notification	<u> </u>
For further information	concerning this matter, please of	call:	<u>,</u>
	Tom Tyler	at (-4422
Name	of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check for	the following amount:		
♥ \$25.00 Filing Fee	S30.00 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 Divisi P.O. E	LING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301	5

COVER LETTER

÷.,

.!

ê.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MYAKKA LANDING, LLC

(Name of the Limited Liability Company as it now appears on our records.)	
(A Florida Limited Liability Company)	

This amendment is submitted to amend the following:

7

A. If amending name, enter 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 "L.L.C."

Enter new principal offices address, if applicable:	755 Anna Hope Lane			
(Principal office address MUST BE A STREET ADDRESS)	Osprey, Florida 34229	$\sum_{n \in \mathbb{N}}$	22	
		53	0 E	
			R	a contract
Enter new mailing address, if applicable:	P.O. Box 1540		-1	Y LEASTIN
(Mailing address MAY BE A POST OFFICE BOX)	Osprey, Florida 34229		РМ	Π
		Q.	ŝ	الم المراجع ال المراجع المراجع
		<u>Ş</u> ri	37	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:	George Alexander Paliatsos		
New Registered Office Address:	755 Anna Hope Lane		
	Enter Florida street address		
	Osprey	. Florida	34229
	City	- <u></u> /	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 V 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</u> or Managing Member being added or removed from our records:

,

· · __ -···

_____ . _ _ _ _ _ _

MGR = Manager MGRM = Managing Member

a 1

~~

: .

÷,

-

<u>Title</u>	Name	Address	Type of Action
MGR	George A. Paliatsos	755 Anna Hope Lane Osprey, Florida 34229	Add Remove
MGR	Thomas C. Tyler, Jr.	981 Ridgewood Avenue, Suite 104 Venice, FL 34285	☐ Add ✔ Remove
			_ Add _ Remove
			_ Add _ Remove
	<u> </u>		Add Rempe -7
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
			-
			-
Dated	December 3		<u></u>
	George A	authorized representative of a member	
—		printed name of signee	
		Page 2 of 2	

Filing Fee: \$25.00