

**L08000060168**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : WHWN, INC.  
Account Number : 120060000124  
Phone : (407) 246-6584  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**O.B.T. PROPERTIES, LLC**

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

H080002661043

**SUBJECT: O.B.T. Properties, LLC**  
*(Name of Limited Liability Company)*

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gregory L. Holzhauser, Esquire  
*(Name of Person)*

Winderweede, Haines, Ward & Woodman, P.A.  
*(Firm/Company)*

329 Park Avenue North, Second Floor  
*(Address)*

Winter Park, FL 32789  
*(City/State and Zip Code)*

For further information concerning this matter, please call:

Vanessa J. DiSimone, Esquire at ( 407 ) 423-4246  
*(Name of Person) (Area Code & Daytime Telephone Number)*

Enclosed is a check for the 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, Certificate of Status & Certified 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

**FILED**  
H080002661043  
08 DEC -2 AM 7:59  
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TALLAHASSEE FLORIDA

O.B.T. Properties, LLC

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

The Articles of Organization for this Limited Liability Company were filed on June 17, 2008 and assigned Florida document number L08000060168.

This amendment is submitted to amend the following:

**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:

(Principal office address MUST BE A STREET ADDRESS)

1411 South Orange Blossom Trail

Orlando, FL 32805

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1411 South Orange Blossom Trail

Orlando, FL 32805

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

Name of New Registered Agent:

Shane Crain

New Registered Office Address:

1411 South Orange Blossom Trail

*(Enter Florida street address)*

Orlando

*(City)*

Florida 32805

*(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.*

*Shane Crain*

*(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:

H080002661043

MGR = Manager  
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Gregory L. Holzauer	329 Park Avenue North Second Floor Winter Park, FL 32789	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Owen S. Matthews	1411 South Orange Blossom Trail Orlando, FL 32805	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated December 2, 2008

Gregory L. Holzauer  
Signature of a member or authorized representative of a member

Gregory L. Holzauer, authorized representative  
Typed or printed name of signee

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TALLAHASSEE FLORIDA

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