

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations

Fax Number: (850) 617-6383

From:

Account Name: LEGALZOOM.COM, INC.

Account Number: I20010000062

Phone: (323) 962-8600

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TROPICAL NORTH POINTE LLC

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EXAMINER

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608-62217

FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Francyne Carrillo
DATE	2008-07-22 21:38:11 GMT
RE	FW: 18506176383

COVER MESSAGE

From: BizCopier1@legalzoom.com [BizCopier1@legalzoom.com]
Sent: Tuesday, July 22, 2008 4:32 PM
To: Francyne Carrillo
Subject: 18506176383

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TROPICAL NORTH POINTE 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:

Francyne Carrillo

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

7083 Hollywood Blvd., Suite 180

(Address)

Los Angeles, CA 90028

(City/State and Zip Code)

For further information concerning this matter, please call:

Francyne Carrillo

(Name of Person)

at (323) 962-8600

(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

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DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TROPICAL NORTH POINTE 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 06/25/2008 and assigned Florida document number L08000062217.

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 "LLC."

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:

New Registered Office Address:

3110 Reynolds Road

(Enter Florida street address)

Lakeland

(City)

Florida 33803

(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)

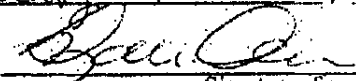
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Liza M. Lucas	3110 Reynolds Road Lakeland, FL 33803	☒ Add ☐ Remove
MGRM	Jose Arce	2438 Tahoe Drive Lakeland, FL 33805 MGRM	☐ Add ☒ Remove
MGRM	Liza Lucas	2438 Tahoe Drive Lakeland, FL 33805	☐ Add ☒ Remove
MGRM	Julie LeBlanc	3110 Reynolds Road Lakeland, FL 33805	☒ Add ☐ Remove
MGRM	Shane Spassoff	3110 Reynolds Road Lakeland, FL 33805	☒ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated July 16, 2008



Signature of a member or authorized representative of a member

Liza Lucas, Member

Typed or printed name of signer

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Filing Office
STATE OF FLORIDA
CORPORATION DIVISION