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D. BRUCE

MAY - 4 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 22, 2010

SCOTT D. HAWKINS 2303 CUMBERLAND PKWY ATLANTA, GA 30339

SUBJECT: PARKWAY OFFICE PARTNERS, LLC

Ref. Number: L08000062669

We have received your document for PARKWAY OFFICE PARTNERS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 810A00010010



COVER LETTER

TO: Registration S Division of Co			* · · · ·		
SUBJECT:	Parkway O	ffice Partners, LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	ondence concerning this matte	r to the following:			
		Scott D. Hawkins			
		Name of Person			
		Firm/Company			
	2303 Cumberland Pkwy.				
		Address			
		Atlanta, GA 30339			
		City/State and Zip Code			
	VS	teele@resourcere.com (to be used for future annual report notification	HAY-3		
For further information	concerning this matter, please	•	नी है गि		
V	ictoria Steele	at (_770) 438	-6675 EST -		
Name	of Person	Area Code & Daytime Tele	phone 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 A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	3		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	rkway Office	Partners, LLC	on our records.)		
(/	A Florida Limited L	Liability Company)	-		
The Articles of Organization for this Limited Liability Company were filed on 6/26/2008 and assigne					
Florida document numberL0800006	2669				
This amendment is submitted to amend the fol	lowing:				
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	ted Liability Compan	y," the designation "	'LLC" or the abbreviation	
Enter new principal offices address, if applicable:		2303 Cumberla	and Pkwy.		
(Principal office address MUST BE A STREET ADDRESS)		Atlanta, GA 30	339	是您	
				<u> </u>	
Enter new mailing address, if applicable:	2303 Cumberla	and Pkwy.	ASSEE O		
(Mailing address MAY BE A POST OFFICE	Atlanta, GA 30	339	F S TATE		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	ffice address her			هنتر	
New Registered Office Address:	16506 Pointe Village Drive, Suite 201				
New Registered Office Address.	Enter Florida street address			ldress	
		Lutz, Florida		33558	
	City			Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:	<u>.</u>			
I hereby accept the appointment as register					

Page 1 of 2

If Changing Registered Agent, Signature of New Registered Agent

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 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** MGR Scott D. Hawkins 2303 Cumberland Pkwy. ✓ Add~ Remove Atlanta, GA 30339 11013 Countryway Blvd. ☐ Add Tampa, FL 33626 ✓ Remove □ Add Remove Add Remove \square Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Hawkins Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00