

| 5                       |                    |             |
|-------------------------|--------------------|-------------|
| (Re                     | equestor's Name)   | ,           |
| (Ac                     | ddress)            | <u> </u>    |
| (Ac                     | ddress)            |             |
|                         |                    |             |
| (Ci                     | ty/State/Zip/Phon  | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL.       |
| (Bu                     | usiness Entity Nai | me)         |
|                         |                    |             |
| (Do                     | ocument Number)    | <u> </u>    |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |

Office Use Only

G. MCLEOD

AUG 3 1 2009

**EXAMINER** 



500159100085

08/28/09--01005--021 1:025.00

09 AUG 28 AM 8: 13

## **COVER LETTER**

| ro: Registration Section   | ns)   |  |   |
|--|---|--|---|
| The second state of the second se   |   | A commission of the commission |   |
| SUBJECT: <u>Howey Real</u>   | ty. LLC                                     | 1711111. 0   |   |
|  | Name of Limited                             | d Liability Company  |   |
|  |   |  | • ,   |
| The enclosed Articles of Amend   | ment and fee(s) are subm                    | itted for filing.  |   |
| Please return all correspondence   | concerning this matter to                   | o the following:   |   |
|  | Walanaa A Canala                            | *  |   |
|  | Michael A. Croak                            | Name of Person   |   |
| 1  | Michael A. Croak                            |  |   |
|  |   | Firm/Company   | <del></del>   |
|  |   | · · · · · · · · · · · · · · · · · · ·  |   |
| •  | 2785 S. Bay Stre                            | et Suite G   |   |
|  |   | Address  | · ·   |
|  |   | ·  |   |
|  | Eustis, FL 3272                             |  |   |
| a contraction of the contraction | in Zuntte<br>Fe                             | City/State and Zip Code  | · · · · · · · · · · · · · · · · · · ·   |
| 7.75 ° t.  | 10 11 - 11 (1-                              |  | <u></u>   |
|  | E-mail address: (10                         | be used for future annual report notificat   | ion)  |
| For further information concern  | ing this matter, please ca                  | dt:  | •   |
| •  |   |  | •   |
| Michael A. Cr  |   | at (352 ) 357-9208   |   |
| Name of Person   | 1 .   | - Area Code & Daytime T  | elephone Number   |
| •  | •   | -  |   |
| E-sleed in a shock for the follo   | · · · · · · · · · · · · · · · · · · ·       |  |   |
| Enclosed is a check for the follo  |   |  | -   |
| X \$25.00 Filing Fee   | 30.00 Filing Fee &<br>Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAILING A Registration Division of C P.O. Box 633 Tallahassee,   | Section<br>Corporations<br>27               | STREET/COURIES Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3236   | ions<br>er Circle   |

DIVISION OF CORPORATIONS

09 AUG 28 AM 8: 13

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Howey Realty, LLC  | Lilita Camanana aa it u aan               |                              |                          |
|--|---|------------------------------|--------------------------|
| (Name of the Limited Lial<br>(A Flor   | rida Limited Liability Com                | pany)                        | •                        |
| The Articles of Organization for this Limited Liability Florida document number              | ity Company were filed o                  | n June 30, 2008              | and assigned             |
| This amendment is submitted to amend the following   | ng:                                       | ·                            |                          |
| A. If amending name, enter the new name of the   | limited liability compa                   | ny here:                     |                          |
| NA The new name must be distinguishable and end with the "L.L.C."                            | e words "Limited Liability                | Company," the designation "I | LLC" or the abbreviation |
| Enter new principal offices address, if applicable   | <b>:</b>                                  | NA                           |                          |
| (Principal office address MUST BE A STREET A   | DDRESS)                                   |                              |                          |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.          | <u></u>                                   | NA NA                        |                          |
| B. If amending the registered agent and/or registered agent and/or the new registered office | registered office addres<br>address here: | ss on our records, enter     | the name of the nev      |
| Name of New Registered Agent:  |   | NA -                         |                          |
| New Registered Office Address:   |   | -                            |                          |
|  |   | Enter Florida street ad      | dress                    |
| -  |   | , Florida                    |                          |
|  | 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 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 MGR = Manager MGRM = Managing Member

| <u>Title</u>                    | <u>Name</u>                     | <u>Address</u>  | Type of Action  |  |  |  |
|---------------------------------|---------------------------------|---|-----------------|--|--|--|
| MGR                             | Andrea L. Straub                | 100 S. Palm Avenue<br>Howey-in-the-Hills, FL 34737              | Add  Remove     |  |  |  |
| MGR                             | Carlin Washo                    | 272 Pomaria Place The Villages, FL 32162                        | Add<br>☐ Remove |  |  |  |
| •                               |                                 |   | Add<br>Remove   |  |  |  |
| <u>:</u>                        | <del></del>                     |   | Add Remove      |  |  |  |
|                                 |                                 |   | Add<br>Remove   |  |  |  |
| · ·                             |                                 |   | Add<br>Remove   |  |  |  |
| D. If am                        | ending any other information, e | nter change(s) here: (Attach additional sheets, if necess       | sary.)          |  |  |  |
|                                 | -                               | NA  | -<br>·          |  |  |  |
|                                 |                                 |   | ·<br>           |  |  |  |
|                                 |                                 |   |                 |  |  |  |
|                                 |                                 |   |                 |  |  |  |
|                                 |                                 |   |                 |  |  |  |
| Dated                           | And                             | rea Straub of a member or authorized representative of a member |                 |  |  |  |
|                                 | Signature                       | or a member or aumorized representative or a member             |                 |  |  |  |
| Typed or printed name of signee |                                 |   |                 |  |  |  |

Page 2 of 2

Filing Fee: \$25.00