

W08000064192Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((1108000268478 3)))



H060002684783ABCA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : STEIN, ROSENBERG & STEIN P.A.
Account Number : I20020000005
Phone : (561) 368-0888
Fax Number : (561) 368-2010 954-772-42242008 DEC -5 AM 8:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

APPLETREE REALTY, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

RECEIVED

08 DEC -5 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

Electronic Filing Menu

Corporate Filing Menu

DEC - 8 2008
Help

EXAMINEF

<https://efile.sunbiz.org/scripts/efilcovr.exe>

12/05/2008

H08000268478 3

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

APPLETREE REALTY, 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 JULY 1, 2008 and assigned
Florida document number L08000064192.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

(Enter Florida street address)

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 Changing Registered Agent, Signature of New Registered Agent)

H08000268478 3

H08000268478 3

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

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|--------------|------------------------------|--|
| MGRM | GARY HILLERT | 205 NORTH COUNTRY CLUB DRIVE | <input checked="" type="checkbox"/> Add |
| | | ATLANTIS, FLORIDA 33462 | <input checked="" 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 |

2008 DEC -5 AM 8:27
 TALLAHASSEE, FLORIDA
 SECRETARY OF STATE

FILED

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

Dated December 5, 2008



Signature of a member or authorized representative of a member

Barry Standig

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

H08000268478 3