## L08000067044

(Re	questor's Name)	<u> </u>
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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J. BRYAN

SEP -3 2008

EXAMINER

## **COVER LETTER**

Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Co	rporations		
SUBJECT: HONE	Y LAKE PLANTATIO	ON, LLC	
•		nited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspondent	ondence concerning this matter	r to the following:	
	ROBERT L. WILLIAMS	ON (Name of Person)	
		(reame of reison)	08 Jivise
			SI 🚉
		(Firm/Company)	OF CENT
	89151 OLD HIGHWAY	PT	
		(Address)	3. 20 3. 20
	TAVERNIER, FLORIDA	33070	OB SEP-2 PH 3: 27
		(City/State and Zip Code)	
For further information c	oncerning this matter, please c	all:	
	201	100 0	
ROBERT L. WILLIAMSON (Name of Person)		at ( <u>678) 300 - 450</u> (Area Code & Daytime T	Celephone Number)
Enclosed is a check for the	ne 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)
	ING ADDRESS: ation Section	STREET/COURIER Registration Section	ADDRESS:

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

DIVISION OF 2 PH 3: 23

HONEY LAKE PLANTATION, 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 Liab Florida document number <u>L08000067044</u>	oility Company were filed on JULY 10	, 2008 and assigned	
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company here:		
HONEY LAKE TIMBERLAND HOLDINGS, LLC			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," t	he designation "LLC" or the abbreviation	
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET			
	<del> </del>		
Enter new mailing address, if applicable:	_		
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our re e address here:	ecords, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter F	lorida 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)

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:

	<u>Name</u>	Address	Type of
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nendin	g any other information, enter chan	nge(s) here: (Attach additional sheets, if necessary.)	08 SEP -2
endin	Labort SUL	nge(s) here: (Attach additional sheets, if necessary.)	08 SEP -2 PH

Page 2 of 2

Filing Fee: \$25.00