## L08000081978

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
	ent Services CM, LLC d Liability Company)
The enclosed Articles of Amendment and fee(s) are submi	itted for filing.
Please return all correspondence concerning this matter to	the following:
	(Name of Person)
Schuma	nn law Group, P.A (Firm/Company)
3151 Bonita	Bay BIVOL Ste 200
Bonita Spni	City State and Zip Code)
For further information concerning this matter, please call:	:
Trisa Mena	at (239) 949 - 4529 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
OVENUUSIU Sent Certificate of Status	□\$55.00 Filing Fee & □\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Wireturned Art of Correction, V not enclose Mailing address:	·
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



October 27, 2008

RAYMOND L. SCHUMANN SCHUMANN LAW GROUP, P.A. 3451 BONITA BAY BLVD., SUITE 200 BONITA SPRINGS, FL 34134

SUBJECT: LAND INVESTMENT SERVICES CM, LLC

Ref. Number: L08000081978

We have received your document for LAND INVESTMENT SERVICES CM, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

I am enclosing an Amendment form.

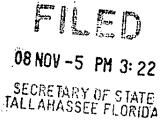
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 408A00055189

Neysa Culligan Document Specialist

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Land Invistment Services CM CCC
(Name of the Limited Liability Company as it now appears on our records.)

(A Flor	rida Limited Liability Company)	
The Articles of Organization for this Limited Liabili	_	127/08 and assigned
Florida document number <u>LO800081</u>	<u>197</u> \$	
This amendment is submitted to amend the followin	ng:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company,"	'the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	<b>:</b>	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:	·	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or re registered agent and/or the new registered office		records, enter the name of the new
,	address nere.	
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street address)	
-	(City)	, Florida (Zip Code)
	( +>/	(=.p ====)

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

MGRM = Managing Member

Title **Name** Address' Type of Action Sean Burns Remove Moren Robert J. Long MGRM Land Invistment Services, P.A 🗂 Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October 31,5+ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00