## L08000085585

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DIVISION OF CORPORATIONS

10 JUL 16 PH 1:37

T. HAMPTON

JUL 1 9 2010

EXAMINER

## **COVER LETTER**

Division of Co					
SUBJECT:	DS CREATIV	VE HOUSING, LLC			
SUBJECT:		ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	SARAH A SMITH				
		Name of Person			
	DS CF	REATIVE HOUSING, LLC Firm/Company	· · · · · · · · · · · · · · · · · · ·		
		<b>Рини Солирану</b>			
	4100 ST JOHNS PARKWAY				
		Address			
•		SANFORD, FL 32771 City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
	SSM	/IITH@SAFE-HUT.COM			
	E-mail address: (	to be used for future annual report notifica	ation)		
For further information	concerning this matter, please of	call:			
SAI	RAH A SMITH	at ( 407 ) 878	-3845 X 12		
Name	of Person	Area Code & Daytime	Telephone Number		
	<b>k</b> .		•		
Enclosed is a check for	-				
<b>▼</b> \$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)		
MAII	ING ADDRESS:	STREET/COURIE	R ADDRESS:		
Regis	tration Section on of Corporations	Registration Section Division of Corporat			
P.O. E	Box 6327 lassee, FL 32314	Clifton Building 2661 Executive Cen			
i anai	1113366, I Li J2J14	Tallahassee, FL 323			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DS C	REATIVE I	HOUSING, LI	LC		
(Name of the Limited   (A	Liability Compa Florida Limited L	ny as it now appea Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Lia	bility Company	were filed on	SEPT 9, 2008	and assign	ed
Florida document number L08000085	585				
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company he	<u>re</u> :		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Comp	any," the designation "Ll	LC" or the abbr	reviation
Enter new principal offices address, if applicable:		4100 ST JOI	HNS PARKWAY		<u> </u>
(Principal office address MUST BE A STREET ADDRES		SANFORD,	FL 32771	10	SEG
				3	22
		•		20	유
Enter new mailing address, if applicable:		4100 ST JOH	INS PARKWAY		200 200 200
(Mailing address MAY BE A POST OFFICE BOX)		SANFORD,	FL 32771		S S S
		-		'G50	AIE
					SKG
B. If amending the registered agent and/o			our records, <u>enter th</u>	<u>ie name of t</u>	he new
registered agent and/or the new registered of	<u>ice address her</u>	<u>'e</u> :			
Name of New Registered Agent:	SARAH A S	SMITH			
New Registered Office Address: 4100 ST JOHNS PARKWAY  Enter Florida street address					
		SANFORD	, Florida	32771	<del></del>
		City	· <del></del>	Zip Code	
Name Danistanced Amends Classicaline States of the Danish		_			

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:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGRM	CHARLES E BRADSHAW	P.O. BOX 1683 ORLANDO, FL 32802	Add <b>7</b> Remove
<u>MGRM</u>	JEFF VRATANINA	4100 ST JOHNS PARKWAY SANFORD, FL 32771	Add Remove
			Add Remove
	THE STREET CO.		Add Remove
			Add Remove
			Add Remove
	- ·	pe(s) here: (Attach additional sheets, if necessary.)  DRESS IS 4100 ST JOHNS PARKWAY	
	ANFORD, FL 32771.		SECRETARY OF SECRETARY OF CORPC
Dated	Silac	or authorized representative of a member	STATE ORATIONS
	S	ARAH A SMITH	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00