608000088349

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EXAMINER

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COVER LETTER

Division of Cor	porations				
SUBJECT: Dunhar	n Rhoden Myer We	st, LLC			+
50 5 0 2 01.		ited Liability Company)			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Charles Chilton				
		(Name of Person)			
	Sharit, Bunn & Chilton			7AS	
		(Firm/Company)		ECR ECR	or a
	99 Sixth Street S.W.			2008 OCT 3 PH I2: 55 SECRETARY OF STATE FALLAHASSEE, FLORIDA	
		(Address)		SERY W	
				F	
	Winter Haven, FL 33880			151 152 153 153 153 153 153 153 153 153 153 153	Ç
		(City/State and Zip Code)		SS RIDA	•
For further information c	oncerning this matter, please c	all:			
Charles Chilton		at (863) 293-5000			
	of Person)	at (<u>863</u>) 293-5000 (Area Code & Daytime ?	Telephone Number	·)	
((Nicu codo a suyumo	otophone rumbor	,	
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	□\$30.00 Filing Fee &	□\$55.00 Filing Fee &	☑\$ 60.00 Filir	ng Fee.	
	Certificate of Status	Certified Copy	Certificate	e of Status &	
		(additional copy is enclosed)	Certified ((additiona	Copy al copy is enclose	ed)
			•	• •	•
MAIL	ING ADDRESS:	STREET/COURIER	R ADDRESS:		

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Registration Section

TO:

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

Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dunham Rhoden Myer West, LLC (Name of the Limited L (A F	iability Company as it now appears on ou lorida Limited Liability Company)	ır records.)	
The Articles of Organization for this Limited Liab Florida document number L08000088349	oility Company were filed on Septembe	r 16, 2008	and assigned
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited liability company here:		
Dunham Ranch West, LLC			TALL ZEG
The new name must be distinguishable and end with the 'L.L.C."	the words "Limited Liability Company," the	e designation '	or sabbreviation
Enter new principal offices address, if applicab	de:		SA ω
Principal office address MUST BE A STREET.	ADDRESS)		
			IZ: 55
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 office		cords, <u>enter</u>	the name of the new
Name of New Registered Agent:	Charles R. Chilton		
New Registered Office Address:	99 Sixth Street, S.W.		
-	(Enter Flo	orida street a	ddress)
	Winter Haven,	_, Florida _	33880
	(City)		(Zip Code)
1 D 2-4 3			

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. Thereby 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 = Mar MGRM = M	nager Ianaging Member				
<u>Title</u>	Name	Address	<u>T</u>	pe of Ac	tion
				Add Remove	
				Add Remove	
	<u></u>		_	Add Remove	
				Add Remove	
				Add Remove	
D. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary	-	Add Repove 0CT 13	
<u> </u>			Y OF STATE	PH 12: 55	
Dated Octob	er 8 , 2008				
	Athaleem Chunh Signature of a member of	am r authorized representative of a member			
	Kathaleen Dunham	printed name of signee		<u>.</u>	
	i yped or	printed name of signee			

Page 2 of 2

Filing Fee: \$25.00