L08000091812

(Requestor's Name)
(Address)
(1441555)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Cartificat Canina Cartification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
·





500137239655

10/31/08--01009--001 **25.00

2000 OCT 31 AM IO: 22

C. LEWIS

NOV 32008

EXAMINER

COVER LETTER

TO: Registration Division of C	Section' orporations					
SUBJECT: P	ALMORP	DEVELOP (Name of Lim	PMENT GROUP, ited Liability Company)	LIC		
The enclosed Articles of	of Amendment an	d fee(s) are sub	mitted for filing.			
Please return all corres	pondence concert	ning this matter	to the following:			
	Gus De Ri	beaux				
			(Name of Person)			
	Law Offices of Gus De Ribeaux, P.A.					
			(Firm/Company)	•		
	2903 Salze	edo Street				
			(Address)			
	Coral Gables, Florida 33134					
		•	(City/State and Zip Code)			
For further information	n concerning this	matter, please c	all:			
Magi Ahrens			at (305) 446-7990			
(Name of Person)		(Area Code & Daytime Telephone Number)				
Enclosed is a check for	r the following an	nount:				
☑ \$25.00 Filing Fee	□\$30.00 Fi Certific	ling Fee & ate 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)		

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2008 OCT 31 AM IO: 22
SEURETARILLE FLORIC

PALMCORP DEVELOPMENT, GROUP, 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 Li	ability Company were filed on 9/26/2008	and assigned
Florida document number L08000091812	<u>.</u>	
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if application	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE)	BOX)	
B. If amending the registered agent and/oregistered agent and/or the new registered of		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Flo	rida 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	GUS DE RIBEAUX	2903 Salzedo Street Coral Gables, FL 33134	Add Rèmove
MGRM	CARLOS TOSCA	2903 Salzedo Street Coral Gables, FL 33134	Add Remove
MGRM	GAMA Real Estate Holdings LLC	2903 Salzedo Street Coral Gables, FL 33134	Add Remove
MGRM	TOSCA Real Estate Corporation	6844 Sunrise Court Coral Gables, FL 33134	Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necess	:ary.)
_			ZIM OCT
Dated Octo		7/.	31 AMIO:
		r or authorized representative of a member	22
	Gus De Ribeaux Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00