

LD8000095320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

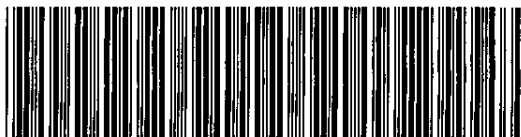
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

NOV 12 2008

EXAMINER



900137653769

11/10/08--01006--022 **50.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 NOV 10 PM 3:08

Consolidated Management, Inc.

24500 Chagrin Boulevard, Suite 200
Beachwood, Ohio 44122
(216) 464-5130 ext. 3071
(216) 360-0799 Fax

November 6, 2008

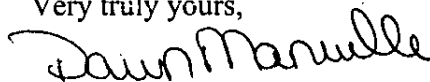
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

Ladies and Gentlemen:

Enclosed please find the following documents:

1. Articles of Amendment to Articles of Organization for RRR Palmway II, LLC;
2. Articles of Amendment to Articles of Organization for RRR Palmway III, LLC; and
3. Our check in the amount of \$50.00 for filing fees.

Very truly yours,



Dawn Manuelle
Paralegal

Enclosures

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RRR Palmway II, 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 Liability Company were filed on October 8, 2008 and assigned
Florida document number L08000095320.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Robert G. Risan

New Registered Office Address:

411 77th Avenue North

(Enter Florida street address)

St. Petersburg

(City)

Florida

33702

(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 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

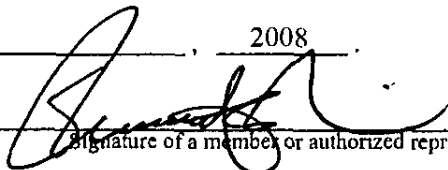
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Robert G. Risan	24500 Chagrin Blvd. #200 Beachwood, Ohio 44122	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Robert R. Risan	24500 Chagrin Blvd. #200 Beachwood, Ohio 44122	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated October 31

2008



Signature of a member or authorized representative of a member

Robert G. Risan

Typed or printed name of signee