L08000105901

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SECRETARY OF STATE DIVISION OF CORPORATIONS

J. BRYAN

FEB 1 2 2009

EXAMINER

COVER LETTER

Registration Section

TO:

Division of Cor	porations			
SUBJECT Sympho	ony Concierge II C		0	
SUBJECT: Symphony Concierge, LLC (Name of Limited Liability Company)				
	Amendment and fee(s) are sub		OSEBII AHII: 09	
	Laura L. Ferrante, Esq.	(Name of Person)		
	Hession & Ferrante			
		(Firm/Company)		
	248-3 Levy Road	(Address)		
	Atlantic Beach, Florida 32	2233 (City/State and Zip Code)		
For further information of	oncerning this matter, please co	all:		
Laura L. Ferrante at (904) 247-8989		<u> </u>		
(Name	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for the	he following amount:			
☑ \$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)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons r Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Symphony Concierge, 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 November 13, 2008 Florida document number <u>L</u>08000105901 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: New Registered Office Address: (Enter Florida street address)

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.

(City)

(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 **Type of Action Address Title** Name 1 MGR M.G.Orender 7807 Baymeadows Road East, Ste. 205 ■ 7 Add Jacksonville, Florida 32256 Remove ∫ Add Remove 🗂 Add Remove Remove Add Remove _ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated February 9 Signature of a member or authorized representative of a member Laura L. Ferrante, Esq. Incorporator Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00