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SECRETARY OF STATE
DIVISION OF CORPORATION

10 SEP 14 AM 11:38

T. HAMPTON
SEP 1 5 2010
EXAMINER

## **COVER LETTER**

Division of Co					
SUBJECT:	Ethos De	evelopment, LLC			
	Name of Limi	ted Liability Company	And Annual or Malantin Annual Malantin Annual Annua		
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
		Reza Yazdani	· · · · · · · · · · · · · · · · · · ·		
		Name of Person			
	Ett	hos Development, LLC			
		Firm/Company			
		P.O. Box 67185			
	Address				
	St. Petersburg, FL 33736				
		City/State and Zip Code			
	E-mail address: (i	rezamail@aol.com to be used for future annual report notif	ication)		
For further information	concerning this matter, please of	-	,		
Reza Yazdani			220-2329		
Name	of Person	Area Code & Daytim	e Telephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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

(Name of the Limited	Liability Compa Florida Limited I	ny as it now appears o Liability Company)	n our records,)	<del></del>
The Articles of Organization for this Limited L Florida document number		were filed on <u>Ja</u>	nuary 5, 2010	and assigned SECRET
This amendment is submitted to amend the following	owing:			OF CO
A. If amending name, enter the new name o	f the limited liab	ility company here:		of STA arpora <b>AM II:</b>
The new name must be distinguishable and end wi "L.L.C."	h the words "Limi	ited Liability Company,	" the designation "L	LC" or the bbresian
Enter new principal offices address, if applicable:		3001 Rocky Poi	nt East, Ste 20	0
(Principal office address MUST BE A STREE	T ADDRESS)	Tampa, FL 3360	)7	
			<u>,</u>	
Enter new mailing address, if applicable:		P.O. Box 67185	· · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	St. Petersburg,	FL 33/30	
B. If amending the registered agent and/ registered agent and/or the new registered of	-		records, enter t	he name of the n
Name of New Registered Agent:	Steven M. Wilsey			
New Registered Office Address:	1000 16th Street North			
		Enter	Florida street addi	ress
	St.	Petersburg	, Florida	33705
Now Desistant Assetts Signature if showing	<b></b>	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

Page 1 of 2

MGR = Manager MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
MGR	Reza Yazdani	P.O. Box 67185 St. Petersburg, FL 33736	Add Remove
<u>MGR</u>	Poya Rouhi	5155 Beach River Road Windermere, FL 34786	Add  Remove
			Add Remove
<del></del>			Add Remove
	····		Add Remove
***************************************			Add Remove
D. If amen	ding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessar	y.)
Dated	9 / // 2	?n)/) i	
Dated	R		
	·	nber or authorized representative of a member Yazdani and Poya Rouhi	SEI IO
	Тур	ped or printed name of signee	SEP CREE
		Page 2 of 2	F OF SECTION
		Filing Fee: \$25.00	OF SI ORPOR