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20回 SEP - 1 AM 9: 43 SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. CLINE

SEP - 2 2010

EXAMINER

COVER LETTER

TO: Registration S Division of Co		•				
SUBJECT:	405 GU	LF BLVD, LLC				
	Name of Limi	Name of Limited Liability Company				
	f Amendment and fee(s) are sub condence concerning this matter					
	RIC	CHARD P. CATON ESQ				
		Name of Person				
WILLIAMSON, DIAMOND & CATON						
Firm/Company						
	90	075 SEMINOLE BLVD				
	10 10 10 10 10 10 10 10 10 10 10 10 10 1	Address			_	
SEMINOLE, FL 337			2			
		City/State and Zip Code		HAS	, , , , , , , , , , , , , , , , , , ,	
		MGEZAL@WDCLAW.COM E-mail address: (to be used for future annual report notification)				
	E-mail address: (to be used for future annual report notifica	tion)	F 4	T T	
For further information	concerning this matter, please of	call:		F- 0,	ė į	
RIC	HARD CATON	at (_727_)3	98-3600	TATE ORIDA		
Name	of Person	Area Code & Daytime T	elephone Number			
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &		
	LING ADDRESS:	STREET/COURIE	R ADDRESS:			

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

	405 GULF [BLVD, LLC		
(Name of the Limited (A	Florida Limited I	iny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Li	1/21/09	and assigned		
Florida document number L09000006	5779			
This amendment is submitted to amend the follow	owing:			
A. If amending name, enter the new name of	the limited liab	oility company here		
The new name must be distinguishable and end wit "L.L.C."	h the words "Lim	ited Liability Compar	y," the designation '	
Enter new principal offices address, if applic	able:	260 - 108TH A		ZOED.
(Principal office address MUST BE A STREE	T ADDRESS)	TREASURE IS	SLAND, FL 337	708 EP
Enter new mailing address, if applicable:		260 - 108TH A	VE, #402	M 9
(Mailing address MAY BE A POST OFFICE BOX)		TREASURE IS	SLAND, FL 337	720 /
B. If amending the registered agent and/or registered agent and/or the new registered of Name of New Registered Agent:	fice address her		ur records, <u>enter</u>	the name of the ne
New Registered Office Address:	260 - 108TH AVE, #402 Enter Florida street address			
	TREAS			33706
		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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = M MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Specification
		ĮŦ	SEP Add Remove T
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	-	er change(s) here: (Attach additional sheets, if necessary. V KNOWN AS PAM LATHAM	
-			
<u>-</u>			<u> </u>
Dated	AUGUST 30	$\frac{2010}{}$	
	Signature of a	a member or authorized representative of a member	
	R	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00