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| Special Instructions to | Filing Officer: | | | | | |
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02/16/09--01013--001 **25.00

2009 FEB 16 PM 3: 40 SECRETARY OF STATE

C. LEWIS
FEB 17 2009
EXAMINER

COVER LETTER

| TO: | Registration Sect Division of Corpo | | | |
|---------|--|---|--|--|
| SUBJE | сст: <u>4</u>) | - AVENUE (Name of Limi | NORTH LLC ited Liability Company) | |
| The en | closed Articles of A | mendment and fee(s) are sub | mitted for filing. | |
| Please | return all correspond | lence concerning this matter | to the following: | |
| | · | ROBER | (Name of Person) | |
| | | | (Firm/Company) | The state of the s |
| | | 340 S. F | HLM HVF (Address) | UNIT 412 |
| | • | | City/State and Zip Code) | |
| For fur | ther information con | cerning this matter, please co | uli: | |
| Rol | BEAT L. (Name of) | BRAND Person) | at (941) 3 6 4 - 3 (Area Code & Daytime 7 | 子 タ テ ウ Telephone Number) |
| . / | | following amount: \$\square\$\$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) |
| | | | | (manifestation copy is eliciosed) |

MAILING ADDRESS:

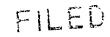
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

The Articles of Organization for this Limited Liability Company were filed on THW 23 2009 and assigned



2009 FEB 16 PM 3: 10

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

Florida document number L090000 7651 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: E. COMANCHE AVE LLC

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) _, Florida ___

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 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 = Ma MGRM = | anager Managing Member | | |
|--------------------|--|--|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| | | | Add Remove |
| D. If amer | nding any other information, enter chang | ge(s) here: (Attach additional sheets, if necess | ary.) |
| - - - | | | 2009 FEB 16 |
| Dated | | or authorized representative of a member | PH 3: WO |
| | ROBERT L. | TRAND or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00