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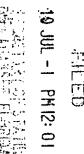
| (Requestor's Name)                      |
|---|
| (Address)                               |
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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S. HAWKES

JUL 2 2010

EXAMINER

## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

**Division of Corporations** Atlantic Coast Land Trust LLC SUBJECT: \_ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Tyson Passmore Name of Person Atlantic Coast Land Trust LLC Firm/Company 630 Azalea Avenue, Suite 203 Address Merritt Island, FL 32952-3711 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Atlantic Coast Land Trust LLC Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

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

| Atla<br>(Name of the Limite  | antic Coast Land Trust LL  | c on our records.)          | <del></del>            |
|--|--|-----------------------------|------------------------|
| (1,11,12,0)  | d Liability Company as it now appear<br>A Florida Limited Liability Company) | ,                           |                        |
| The Articles of Organization for this Limited I                                      |  | 01/28/2009                  | and assigned           |
| Florida document numberL0900000  | 9201   |                             |                        |
| This amendment is submitted to amend the fol   | lowing:  |                             |                        |
| A. If amending name, enter the new name  | of the limited liability company her   | <u>e</u> :                  |                        |
|  |  | ***                         |                        |
| The new name must be distinguishable and end w L.L.C."                               | ith the words "Limited Liability Compa                                       | ny," the designation "l     | LC" or the abbreviatio |
| Enter new principal offices address, if appli  | cable:   |                             |                        |
| Principal office address MUST BE A STRE  | ET ADDRESS)  |                             | 2                      |
|  | · · · · · · · · · · · · · · · · · · ·  |                             |                        |
|  |  |                             | *                      |
| Enter new mailing address, if applicable:  |  | <del>.</del> .              |                        |
| Mailing address MAY BE A POST OFFICE   | <u></u>  |                             |                        |
|  | -  |                             |                        |
| B. If amending the registered agent and egistered agent and/or the new registered of |  | our records, <u>enter t</u> | he name of the nev     |
| Name of New Registered Agent:  | Tyson Passmore   |                             |                        |
| New Registered Office Address:   | 630 Azalea Avenue, Suite 2   | 203                         |                        |
| •  | Ent  | er Florida street add       | ress                   |
|  | Merritt Island   | , Florida                   | 32952                  |
|  | City   |                             | Zip Code               |
| ew 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 = Manager

MGRM = Managing Member **Type of Action Title Address** <u>Name</u> **MGRM** Shay L. Dollar 630 Azalea Avenue, Suite 203 ☐ Add Merritt Island, FL 32952-3711 ∇ Remove Tyson Passmore MGRM 630 Azalea Avenue, Suite 203 ✓ Add Merritt Island, FL 32952-3711 ☐ Remove ☐ Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) June 1st 2010 Dated \_ Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Tyson Passmore

Filing Fee: \$25.00