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AUG 2 0 2010

EXAMINER

## **COVER LETTER**

	zistration Section ision of Corporations			
SUBJECT:	Casa Latin	o Boggy Creek LLC		
SUBJECT.		nited Liability Company		
	,			
The enclosed	d Articles of Amendment and fee(s) are su	abmitted for filing.		
Please return	all correspondence concerning this matter	er to the following:		
		Jose L Rueda  Name of Person		
	CASA	- LAtino Boyay Creek LLC Firm/Company		
	1104 PLAZA DR			
		Address Page 1		
	,	KISSIMMEE FL 34743  City/State and Zip Code		
		City/State and Zip Code		
	ONE.BO	City/State and Zip Code  OGGYCREEK@GMAIL.COM  (to be used for future annual report notification)		
For further is	nformation concerning this matter, please	**************************************		
	JOSE L RUEDA	at ( 305() 801-5446		
	Name of Person	Area Code & Daytime Telephone Number		
Enclosed is	a check for the following amount:			
<b>▼</b> \$25.00 F	iling Fee \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  S60.00 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

CASA LATINO BOG	GY CREEK I	LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears ability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company v Florida document numberL0900013080			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:	:	
ONE REALTY BOGG	SY CREEK LLC	;	
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Compan	y," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	<del></del>		Ty 6
(Principal office address MUST BE A STREET ADDRESS)		-	<del>5</del> = 1
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			19 PM 2: 50
B. If amending the registered agent and/or registered office address here:		ır records, <u>enter t</u> l	he name of the new
Name of New Registered Agent:			<del>-</del>
New Registered Office Address:			
	Enter Florida street address		
•		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			

If Changing Registered Agent, Signature of New 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 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		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Add
			——————————————————————————————————————
			Add
			Add Remove
	<del>.</del>		
			AddRemove
D. 16		tion onto change(a) have (attack additional shoo	
D. Ham	iending any other informa	tion, enter change(s) here: (Attach additional shee	TAS
			FILE ANG 19 CREJASSE LAHASSE
			PH 12: 50 E, FLORIDA
			ATE DRIDA
Dated	AUGUST 16TH	2010	
	Sia	The state of the s	mher
	Sig	nature of a member or authorized representative of a me JOSE L RUEDA	Anoei
• •		Typed or printed name of signee	<u>,,,                                  </u>

Page 2 of 2

Filing Fee: \$25.00