L09000013221

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: P Sheridan Real Estate Holdings, LLC				
(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:				
Dave Owens (Name of Person)				
(Name of Person)				
Entrust 1031 Exchange, LLC f/k/a 1031 Tax Free Strategies, LL				
(Firm/Company)				
4560 Via Royale, Unit 1				
(Address)				
Fort Myers, FL 33919				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Dave Owens at (239) 333-1031 Ext 203				
Dave Owens at (239) 333-1031 Ext 203 (Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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 Limite	sheridan Real Estate Hold ad Liability Company as It now a A Florida Limited Liability Comp	appears on our records,)	
The Articles of Organization for this Limited Florida document number <u>L09000013221</u>		n February 9, 2009 and assigned	
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability compan	ı <u>y here</u> :	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability C	Company," the designation "LLC" or the abbreviation	
B. If amending the registered agent and registered agent and/or the new registered of		on our records, enter the name of the new	
•			
Name of New Registered Agent:	Patricia Sheridan		
New Registered Office Address:	3122 Tennis Villas (Enter Florida street address)		
	Captiva	, Florida <u>33924</u>	
	(City)	Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:	·.	
the provisions of all statutes relative to the	proper and complete perform istered agent as provided for registered office address, I h s change.	this capacity. I further agree to comply with ance of my duties, and I am familiar with and in Chapter 608, F.S. Or, if this document is ereby confirm that the limited liability Agent, Signature of New Registered Avent)	

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 **Title** <u>Address</u> Type of Action Name | **MGRM** Patricia Sheridan 32 Hillcrest Dr **V** Add Upper Saddle River, NJ 07458 Remove 1031 Reverse Exchange Cc 4560 Via Royale, Unit 1 Fort Myers, FL 33919 MGRM □Add | Remove □Add Remove Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Dated August 19 Signature of a member or authorized representative of a member Patricia Sherdian Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00