

L090000014884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2011 OCT 17 AM 8:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

OCT 19 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Scimitar LLC - adding Debiting member
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:

Sergio DeCesare

Name of Person

Community Redevelopment Partners LLC

Firm/Company

27499 Riverview Center Drive, Suite 123

Address

Bonita Springs FL 34135

City/State and Zip Code

acquire@CRP-Project.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Sergio DeCesare

Name of Person

at (239)

580-7408

Area Code & Daytime Telephone 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)

☐ \$60.00 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**

Scimitar LLC

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

The Articles of Organization for this Limited Liability Company were filed on 02/13/2009 and assigned
Florida document number L09000014884.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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)

27499 Riverview Center Drive, Suite 123

Bonita Springs, FL 34135

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

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** _____
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 = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------|--|--|
| MGR | Wendy Winkel | 12441 GREEN STONE COURT FT MYERS FL 33914 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGR | Erika Swanson | 2245 Tulip Tree Lane Clearwater FL 33763 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Erika Swanson is succeeding Wendy Winkel as Authorized Agent for

Scimitar LLC.

Wendy Winkel is resigning and will no longer be a member of Scimitar LLC

Erika Swanson has been added to the LLC in public record.

Dated October 10th, 2011


Signature of a member or authorized representative of a member

Wendy Winkel
Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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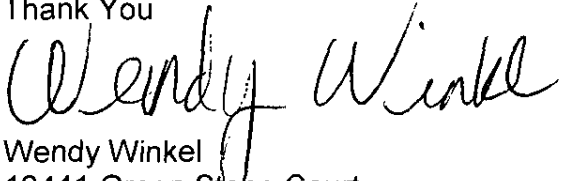
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October 10th 2011

To whom it may concern,

I, Wendy Winkel, resign as Managing Member of Scimitar LLC effective immediately and acknowledge Erika Swanson as my replacement. I also will be resigning as a member of Scimitar LLC effective immediately.

Thank You

A handwritten signature in cursive script that reads "Wendy Winkel".

Wendy Winkel
12441 Green Stone Court
Ft Myers FL 33914

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