

209000016234

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

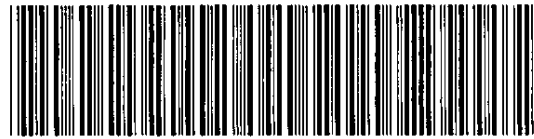
Special Instructions to Filing Officer:

**A. LUNT**

JUN 19 2009

**EXAMINER**

Office Use Only



500155326795

500155326795  
06/11/09--01006--014 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JUN 17 PM 1:48

FILED

# RONALD S. WEBSTER

## COUNSELOR AT LAW

TELEPHONE: (239) 394-8999  
FACSIMILE: (239) 394-3511

985 NORTH COLLIER BLVD.  
MARCO ISLAND, FLORIDA, 34145

E-MAIL: [ronwebster@earthlink.net](mailto:ronwebster@earthlink.net)  
INFO: [www.ronwebster.com](http://www.ronwebster.com)

May 21, 2009

Secretary of State  
Department of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Timeshare Justice, L.L.C.

Dear Sir or Madam:

Enclosed please find Articles of Amendment relative to the above-mentioned LLC. Also enclosed is a check in the sum of \$25.00 representing the filing fee in this regard?

Should you have any questions relative to this matter, please do not hesitate to contact this office.

Sincerely,



Mary A. Adams  
Legal Assistant

MAA  
enclosure



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 27, 2009

MARY ADAMS  
985 N. COLLIER BLVD.  
MARCO ISLAND, FL 34145

SUBJECT: TIMESHARE JUSTICE, L.L.C.  
Ref. Number: L09000016234

We have received your document for TIMESHARE JUSTICE, L.L.C. and check(s) totaling \$125.00. However, your check(s) and document are being returned for the following:

Please note the money amounts differ on the check. Please send a corrected check for the proper amount. The correct amount is \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 609A00017862

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TIMESHARE JUSTICE, L.L.C.  
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:

Mary Adams

Name of Person

Law Offices of Ronald S. webster

Firm/Company

985 N. Collier Blvd.

Address

Marco Island, FL 34145

City/State and Zip Code

Mary@ronwebster.com

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JUN 17 PM 1:49

FILED

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person at (\_\_\_\_\_) \_\_\_\_\_  
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**

Timeshare Justice, L.L.C.

\_\_\_\_\_  
**(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 2/17/09 and assigned  
Florida document number L09000016234.

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)**

855 Bald Eagle Drive  
Marco Island, FL 34145

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

855 Bald Eagle Drive  
Marco Island, FL 34145

**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>
Mem	Ronald S. Webster	985 N. Collier Blvd. Marco Island, FL 34145	<input type="checkbox"/> Add <input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

2009 JUN 12 PM 1:34  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

FILED

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

---



---



---



---

Dated

May 19 2009

Signature of a member or authorized representative of a member  
 Ronald S. Webster

Typed or printed name of signee