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C. LEWIS

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EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJECT: Lake Fern Two Park, LLC					
50.00					
The en	closed Articles o	f Amendment and fee(s) are sul	bmitted for filing.		
Please	return all corresp	oondence concerning this matter	r to the following:	v	***
			Carol A. Westfall		
Name of Person Waterford Firm/Company			Name of Person		
16630 N. Dale Mabry Hwy.				vy.	
Address					
Tampa, FL 33618-1400 City/State and Zip Code					
cwestfall@waterford.cc					
For fur	ther information	E-mail address: (concerning this matter, please o	to be used for future annual rep	ort notification)	
. 0. 141		-			٠
Carol Westfall Name of Person			at (813)	962-6544 X302 Daytime Telephone Number	
	· value		, , , , , , , , , , , , , , , , , , ,	Suy time Telephone Training	
Enclose	ed 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 e	nclosed) Certified	e of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration Division of Clifton Bui	Corporations Iding Itive Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2009 NOV 20 PM 16 57

(Name of the Lim	Lake Fern Two Park, LLC ited Liability Company as it now appear (A Florida Limited Liability Company)	SECRE rs on our records.AH	TARY OF STATE ASSEE, FLORIDA		
The Articles of Organization for this Limite Florida document number	d Liability Company were filed on		and assigned		
This amendment is submitted to amend the	following:				
A. If amending name, enter the new nam	e of the limited liability company her	<u>e</u> :			
The new name must be distinguishable and end "L.L.C."	with the words "Limited Liability Compa	ny," the designation "	LLC" or the abbreviation		
Enter new principal offices address, if ap	plicable:				
(Principal office address MUST BE A STR					
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFIC	CE BOX)				
B. If amending the registered agent an registered agent and/or the new registered		our records, <u>enter</u>	the name of the new		
Name of New Registered Agent:					
New Registered Office Address:					
	Ent	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 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** Name **Address** Type of Action **MGRM** Carol A. Westfall 16630 N. Dale Mabry Hwy. 📝 Add Tampa, FL 33618-1400 Remove □ Add ☐ Remove ☐ Add ☐ Remove ∏Add Remove _∐Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 16 2009 . Dated Signature of a member or authorized representative of a member John Westfall Typed or printed name of signee

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Filing Fee: \$25.00