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D. BRUCE
MAR 1 3 2009
EXAMINER

COVER LETTER

Division of Corp	porations				
STRIECT: Juno Ba	ay Capital Partners,	LLC			
SUBJECT: STATE OF		ited Liability Company)		•	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	On a distable and a second				
	Sandy Albanese	(Name of Person)			
		(ivalile of Person)			
Allied Capital and Development of South Florida, LLC					
	<u></u>	(Firm/Company)			
	11770 US Hwy 1, Suite 3	301			
		(Address)			
	Paim Beach Gardens, FL	_ 33408		Z	
		(City/State and Zip Code)	-	100 Je	
				HA HA	E CORPORTOR OF
For further information co	oncerning this matter, please c	all:		12 SSE	-
				E OF	المرابعة ال
Sandy Albanese	of Person)	at (561) 799-0050 (Area Code & Daytime To	-1t NYtX	FS:	ا ا بر ا
(Ivame C	n reison)	(Area Code & Dayinne 16	eteptione (vuinoer)	OHAR 12 AM 11:55 CRETARY OF STATE LAHASSEE, FUORIDA	U
				A. 01	
Enclosed is a check for the	e 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 Certificate of Certified Conditional	of Status &	l)

MAILING ADDRESS:

Registration Section

TO:

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

Juno Bay Capital Partners, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our record Liability Company)	rds.
The Articles of Organization for this Limited Liability Compar	ny were filed on February 24, 200	and assigned
Florida document number L09000018468		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		Z.,
(Principal office address MUST BE A STREET ADDRESS)		EC:
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		AR 12 AH III
		SS RIDA
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		enter the name of the new
Name of New Registered Agent:		··-
New Registered Office Address:	(Enter Florida s	treat address)
	,	,
	(City), Flo	rida(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>	Address	Type of Action
MGR	Florida 100 Investments, LLC	11770 US Hwy 1, Suite 301 Palm Beach Gardens, FL 33408	Add Remove
			Add Remove
	.		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter char	nge(s) here: (Attach additional sheets, if necess	ary.)
			09 MAR 12 SECRETAR
Dated March 1	laudin	au	LED 2 AHII: 55 YOF STATE E. FLORIDA
_	Signature of a memb	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00