

**L09000018965**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H09000046008 3)))



H090000460083ABC.

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : SAXON, GILMORE, CARRAWAY, GIBBONS, LASH & WILCOX, P.A.  
Account Number : I20030000134  
Phone : (813) 314-4500  
Fax Number : (813) 314-4555

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 FEB 27 AM 7:49

FILED

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**LWHA SUNRISE PARK PHASE I, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	102
Estimated Charge	\$55.00

**C. LEWIS**

MAR - 2 2009

**EXAMINER**

RECEIVED

09 FEB 27 AM 6:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

2009 FEB 27 AM 7:49

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
H09000046008 3

LWHA SUNRISE PARK PHASE I, 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 February 25, 2009 and assigned  
Florida document number L09000018965.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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

H09000046008 3

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<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

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

The first name to the signature of the authorized representative of the Articles of Organization was incorrectly typed as "Alfred." This is a scrivener's error and the name of the authorized representative signing the Articles of Organization is "Albert Kirkland, Jr., Executive Director."

Dated February 26, 2009

/s/ Albert Kirkland, Jr., Executive Director  
Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

H09000046008 3

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 FEB 27 AM 7:50

FILED