

LO9 000026738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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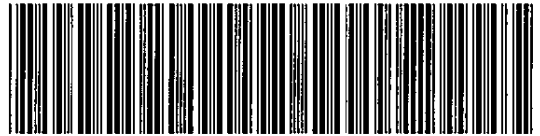
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
PALM BEACH, FLORIDA

T. CLINE

AUG 24 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Silverman-Winter, LLC
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:

Christopher T. Graham, Esq.

Name of Person

The Private Client Law Group

Firm/Company

75 Fourteenth Street, N.E. Suite 2710

Address

Atlanta, GA 30309

City/State and Zip Code

cgraham@tpclg.com

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

For further information concerning this matter, please call:

David H. Durham, Esq.

Name of Person

at (404)

924-4280

Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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**

Silverman-Winter, 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 March 19, 2009 and assigned
Florida document number L09000026738

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)

220 N. Serenata Drive

Unit 634

Ponte Vedra Beach, FL 32082

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

220 N. Serenata Drive

Unit 634

Ponte Vedra Beach, FL 32082

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PALM BEACH, 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:

Robert L. Silverman

New Registered Office Address:

220 N. Serenata Drive Unit 634

Enter Florida street address

Ponte Vedra Beach

Florida

32082

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>
MGRM	Stacy S. Crane	75 Fourteenth Street NE Suite 2710 Atlanta, GA 30309	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	RLS Investments, LLC	220 N. Serenata Drive Unit 364 Ponte Vedra Beach, FL 32082	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

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

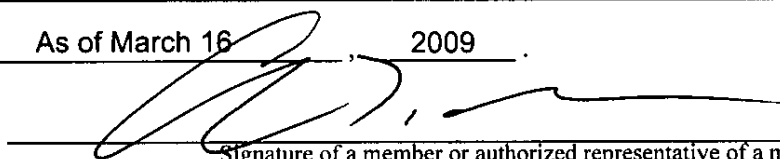
Please change the Managing Member address for Winter Investments, LLC to:

590 Means Street

Suite 220

Atlanta, GA 30318

Dated As of March 16, 2009



Signature of a member or authorized representative of a member

Christopher T. Graham, Esq.

Typed or printed name of signee