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TO:

Division of Corporations

Fax Number : (850)617-6383

From:

G. Joseph Harrison, Esquire

Account Name : HARRISON, KIRKLAND, PRATT, CHULOCK & MCGUIR

Account Number: I20010000002

: (941)746-1167

Fax Number

: (941)746-9229

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Prail Address:	man are Leaembates	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CLEARWATER TRAVEL RESORT, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

D. BRUCE

MAY 26 2010

EXAMINER

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Corporate Filing Menu

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MAY-25-2010 11:43

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLEARWATER TRAV	EL RESORT, I	LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	bility Company)	Our receives.		
The Articles of Organization for this Limited Liability Company v Florida document number	vere filed on	3/19/09	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company here:			
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company,	the designation "L	LC" or the abbreviation	
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)		·	MAY 25 AM 7: 5:	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	ice address on our	records, enter t	he name of the new	
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

	P.03
(//TITONOCIETOSO	2/1/

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	G. Joseph Harrison, Co-Trust of the John M. Denton Trust, u/a/d 6/3/05	ee 1206 Manatee Ave W Bradenton, Fl. 34205	Add Remove
MGR_	Jerry D. Marlar, Co-Trustee of the John M. Denton Trust, u/a/d 6/3/05	1301 6th Ave W. Suite 600 Bradenton, Fl 34205	Add Remove
VP	Caroline D. Foster	8615 Bayshore Rd Palmetto, FL 34221	☑ Add ☑ Remove
<u>P</u> _	J. Ryan Denton	1517 43rd Ave Dr W Palmetto, FL 34221-5714	Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
<u>.</u>			Add Remove
D. If amendi	ng any other information, enter chang	e(s) here: (Attach additional sheets. if necessary.)	
		, in the second	TO MAY 25
Dated	May 21	010	
	(), -	Truste Munium r or authorized representative of a member ee of the John M. Denton Trust, u/a/d 6/3/0	
,		or printed name of signee	

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Filing Fee: \$25.00

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