

L090000029838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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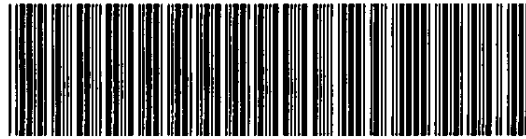
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 26 PM 2:09

T. HAMPTON
AUG 26 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CENTORQUE DEVELOPMENT COMPANY 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:

RAYMOND

RAY PALMACCIO

Name of Person

Firm/Company

6198 SEASCAPE TERRACE

Address

BOYNTON BEACH FL 33437

City/State and Zip Code

dserpentine@msn.com

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

For further information concerning this matter, please call: CELL 609-823-2349

RAYMOND

RAY PALMACCIO

Name of Person

at (561) 637-6744

Area Code & Daytime Telephone Number

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 AUG 26 PM 2:10

CENTORQUE DEVELOPMENT COMPANY 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 27, 2009 and assigned
Florida document number L09000029838.

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**)

6198 SEASCAPE TERRACE

BOYNTON BEACH FL 33437

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

6198 SEASCAPE TERRACE

BOYNTON BEACH FL 33437

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:

RAYMOND

RAY PALMACCIO

New Registered Office Address:

6198 SEASCAPE TERRACE

Enter Florida street address

BOYNTON BEACH

City

Florida

33437

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.

X Raymond Palmaccio

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> |
|--------------|-----------------|---|--|
| MGR | ALBERT J. ANGEL | 605 LINCOLN ROAD SUITE 220 MIAMI BEACH FL 33139 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGR | ANNE AMSTER | X 1100 MAHOGANY WAY #101 DELRAY BCH. FL. 33445 | <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 |

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

Dated _____

Raymond Palmaccio
Signature of a member or authorized representative of a member

RAYMOND PALMACCIO
Typed or printed name of signee

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DIVISION OF CORPORATIONS