## 15900034367

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**EXAMINER** 



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## **COVER LETTER**

TO: Registration Se Division of Cor				
SUBJECT: Aquila Reserve Holdings, LLC				
	(Name of Lim	ited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Lew Oliver			
		(Name of Person)		
	Quinones & Oliver, P.L.			
		(Firm/Company)		
	20751 Newby Street			
		(Address)		
	Orlando, FL 32833			
		(City/State and Zip Code)		
For further information co	oncerning this matter, please c	all:		
Lew Oliver		at ( 407 ) 568-7758		
(Name o	of Person)	(Area Code & Daytime T	Celephone Number)	
Enclosed is a check for th	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 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

Aquila Reserve Holdings, LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on 04/09/2009	and assigned
Florida document number L09000034367		
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	imited Liability Company," the designation	n "LLC" or the abbreviation
'L.L.C."		90 VIS VIS
Enter new principal offices address, if applicable:		<b>AP</b> 100 R
Principal office address MUST BE A STREET ADDRESS)		N 93-
Trincipul office unuress MOST BE A STREET ADDRESS)		
		<del>.</del> 321
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		er the name of the nev
-		
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 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>Name</u>	Address	Type of Action
Kelly, Brady	691 Front Street - Suite 210 Celebration, Florida 34747	Add Remove
Kelly, Cookie	1255 Aquila Loop Celebration, FL 34747	
Cook, James	1241 Aquila Loop Celebration, FL 34747	Add Remove
Cooke, James	1241 Aquila Loop Celebration, FL 34747	Add Remove
		Add Remove
		Add Remove
·		ssary.)
		·····
2	<u></u>	
//	I, Esq.	·
	Kelly, Cookie  Cook, James  Cooke, James  ing any other information, enterase Note that new MGR James Co	Kelly, Brady  691 Front Street - Suite 210 Celebration, Florida 34747  Kelly, Cookie  1255 Aquila Loop Celebration, FL 34747  Cook, James  1241 Aquila Loop Celebration, FL 34747  Cooke, James  1241 Aquila Loop Celebration, FL 34747  Cooke, James  1241 Aquila Loop Celebration, FL 34747  ing any other information, enter change(s) here: (Attach additional sheets, if necessase Note that new MGR James Cooke is just a correction of name spelling error.

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Filing Fee: \$25.00