L0900041037

(Requestor's Name) (Address)		
. (Address)	300157265543	
(City/State/Zip/Phone #)		
(Business Entity Name)		
(Document Number) Certified Copies Certificates of Status	06/22/0901048-022 **100.00 O9 JUN 22 ALCAHASS	
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S. HAWKES
JUN 2 3 2009
EXAMINER

COVER LETTER

TO:

P.O. Box 6327

Tallahassee, FL 32314

TO:	Registration Se Division of Cor		•	
SUBJE	CCT:	1385 South	Patrick Drive LLC	
осы.		Name of Limi	ted Liability Company	
		Amendment and fee(s) are sub	·	
-			Scott E. Holmes	
			Name of Person	
			Firm/Company	
	40 High Ridge Road			
		South	nbury, Connecticut 06488	
			City/State and Zip Code	
		E-mail address: (eh6619@yahoo.com to be used for future annual report notif	ication)
For fur	ther information o	concerning this matter, please o	all:	
		ott E. Holmes	at (203) Area Code & Daytim	615-2890
			,	
Enclose	ed is a check for t	he 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)
	Regist	ING ADDRESS: ration Section on of Corporations	STREET/COURI Registration Section Division of Corpor	on

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1385 S (Name of the Limited Liab	Outh Patrick Drive LLC	on our records.)	
(A Flori	ility Company as it now appears of da Limited Liability Company)	,	
The Articles of Organization for this Limited Liabilit	y Company were filed on	04.28.2009	and assigned
Florida document numberL0900041037	··		
This amendment is submitted to amend the following	; :	75 S.	8
A. If amending name, enter the new name of the	limited liability company here:		2
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	" the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	-		
(Principal office address MUST BE A STREET AL	DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		ress
		, 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Frances A. Holmes	40 High Ridge Road Southbury, Connecticut 06488	Add Remove
MGMR	Timothy Sullivan	490 Riverside Avenue Merritt Island, Florida 32953	Add ✓ Remove
	<u> </u>		Add Remove
			Remove T
			Add Remove 2:5
			Add ³ Remove
D. If amen	ding any other information, enter cl	hange(s) here: (Attach additional sheets, if necessar	y.)
_			
			<u> </u>
Dated		The state of the s	
	Signature of a me	ember or authorized representative of a member	
	т	Scott E. Holmes	

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Filing Fee: \$25.00