

JUN-11-2009 THU 10:14 AM MURAI WALD BIONDO

FAX NO. 3053500000

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Division of Corporations

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L09000052308

Florida Department of State
Division of Corporations
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(((H09000140849 3)))



H090001408493ABC2

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : MURAI, WALD, BIONDO, MORENO, P.A.
Account Number : 076150002103
Phone : (305) 444-0101
Fax Number : (305) 444-0174

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DIVISION OF CORPORATIONS
09 JUN 11 AM 9:45

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

CAMBRIDGE PROPERTY MANAGEMENT SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	4
Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

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JUN 12 2009

EXAMINER

COVER LETTER

FAX AUDIT NO: H09000140849 3

**TO: Registration Section
Division of Corporations**

SUBJECT: Cambridge Property Management Services 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:

Gerald J. Biondo, Esq.

Name of Person

Murai Wald Biondo & Moreno, P.A.

Firm/Company

Two Alhambra Plaza PH 1B

Address

Coral Gables, FL 33134

City/State and Zip Code

igrobelny@mwbm.com

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

For further information concerning this matter, please call:

Jennifer Grobelny

Name of Person

at (305)

444-0101

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

FAX AUDIT NO: H09000140849 3

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Cambridge Property Management Services 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 05/29/2009 and assigned
Florida document number L09000052308.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Cambridge Property Marketing Services LLC

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUN 11 AM 9:44

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:

N/A

New Registered Office Address:

N/A

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

JUN-11-2009 THU 10:15 AM Murai Wald Biondo

FAX NO. 3053584842

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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

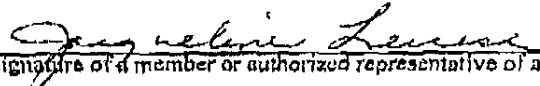
MGRM = Managing Member

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<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.)

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DIVISION OF CORPORATIONS

Dated _____


Signature of a member or authorized representative of a member

Jacqueline Leccese

Typed or printed name of signer

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Filing Fee: \$25.00

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