

L09000055692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

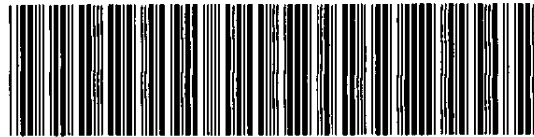
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APR - 1 2011

EXAMINER



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FILED
11 MAR 31 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAFH NATIONAL BANK

March 30, 2011

VIA FED-EX

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
Attn: Jeraline Saulsberry

Re: Name Change Request for CSVL 1, LLC and SI Park, LLC

Dear Ms. Saulsberry,

As per our conversation today, on March 4, 2011, we submitted name change requests for the following companies: (1) CSVL 1, LLC and (2) SI Park, LLC. It appears that these requests were either not received by the Division of Corporations or lost at some point thereafter. As such, I am enclosing herein duplicate copies of the name change requests, as well as an original re-executed copy of the signature page (in case you need an original signature). As we discussed, please make the name changes effective retroactively to March 30, 2011.

If you should have any questions, please contact me directly at 305-405-7004 or email at Joshua.young@nafhnb.com.

Thank you in advance for your cooperation.

Very truly yours,



Joshua E. Young, Esq.
Senior Vice President & Special Assets Counsel
Trustee, Real Estate Estate Holding Trust U/A/D
9/25/2008

Cc: Maria Justo
Jack Partagus
William Owens, Esq.
Michael Kotler, Esq.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CSVL 1, 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:

Michael Kotler, Esq.
Name of Person
SCHWARTZ, GOLD, COHEN, ZAKARIN & KOTLER, P.A.
Firm/Company
54 S.W. BOCA RATON BOULEVARD
Address
BOCA RATON, FL 33432
City/State and Zip Code
mkotler@sgczklaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Kotler at (561) 361-9600
Name of Person 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**

CSVL 1, 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 6/9/2009 and assigned
Florida document number L09000055692.

This amendment is submitted to amend the following:

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

MBSA 1, 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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
11 MAR 31 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

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

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>
			<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated March 4, 2011.

Joshua Young, Trustee
 Signature of a member or authorized representative of a member
 Joshua Young, Trustee, Real Estate Holding Trust U/A/D 9/25/2008
 Typed or printed name of signee

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>
_____	_____	_____	<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

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

Dated March 4, 2011.



 Signature of a member or authorized representative of a member

Joshua Young, Trustee, Real Estate Holding Trust U/A/D 9/25/2008

 Typed or printed name of signee