

Jul 15 2009 9:17 AM

No. 4285 PaP. 1 of 1

L09000065500

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : TRIDENT TITLE LLC
Account Number : I20090000078
Phone : (561) 515-2920
Fax Number : (561) 515-2939

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SHELDON LEVY VENTURES, LLC

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JUL 16 2009

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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EXAMINER

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

FILED
09 JUL 15 AM 8:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sheldon Levy Ventures, 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 July 7, 2009 and assigned
Florida document number L09000065500.

This amendment is submitted to amend the following:

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

Preferred Developers, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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)

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>
MGR	Rod Sheldon	5791 Harrington Way Boca Raton, Florida 33498	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Wendy Sheldon	5791 Harrington Way Boca Raton, Florida 33496	<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.)

09 JUL 15 AM 8:37
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated July 10, 2009



Signature of a member or authorized representative of a member

Andrea M. Holloway
Typed or printed name of signee