

LO9 0000 66122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

LO9- 66122

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

OCT 15 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Orlando Luxury Homes LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Katrina A. Smith
Name of Person

Engel & Voelkers
Firm's name

550 W. New England Ave
Address

Winter Park FL 32789
City, State and Zip Code

Katrina.smith@engelvoelkers.com
E-mail address (to be used for future annual report notifications)

For further information concerning this matter please call:

Katrina Smith
Name of Person

407-575-0688
Voice, fax & TDD/Relay Florida number

Enclosed is a check for the following amount:



☐ \$50.00 Filing Fee &
Certificate of Status

☐ \$50.00 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
Chilton Building
2601 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2009

KATRIN SMITH
ENGEL & VOELKERS
550 W. NEW ENGLAND
WINTER PARK, FL 32789

SUBJECT: ORLANDO LUXURY HOMES LLC
Ref. Number: L09000066122

We have received your document for ORLANDO LUXURY HOMES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 109A00031985

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TALLAHASSEE, FLORIDA

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

ORLANDO LUXURY HOMES

(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 9, 2009 and assigned
Florida document number L09000066122

This amendment is submitted to amend the following:

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

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)

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 TALAHASSEE, 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: PROFESSIONAL ACCOUNTING & TAX SERVICES, Inc.

New Registered Office Address: 7854 W IRLO BRONSON HWY

Enter Florida street address

KISSIMMEE, Florida 34747

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

Title	Name	Address	Type of Action
MGR	Stephan Bolser	PO BOX 1715 MARCO ISLAND FL 34946	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Linda Angeles	234B Topaz Trail KISSIMMEE FL 34773	<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.)

Dated _____

Signature of a member or authorized representative of a member

Kathine A. Smith
Typed or printed name of signee

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