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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

SEP - 4 2009

EXAMINER

COVER LETTER

TO: Registration So Division of Co	ection rporations			
SUBJECT:	Gables	Property, LLC		
	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Damarys Martinez		
Name of Person Sanchez-Medina, Gonzalez & Quesada, LLP				
	2333 Po	2333 Ponce de Leon Blvd., Ste. 302		
		Address		
	Cors	al Gables, Florida 33134		
		City/State and Zip Code		
dmartinez@smgqlaw.com				
	E-mail address: (t	o be used for future annual report notifica	tion)	
For further information c	oncerning this matter, please ca	all:		
Damarys Martinez		40 (24-0236	
Name o	f Person	Area Code & Daytime T	'elephone Number	
Enclosed is a check for the	ne 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

Bables Property, LLC		
<mark>iability Company as it now appea</mark> Iorida Limited Liability Company)	irs on our records.)	
	July 10, 2009	and assigned
ring:		
he limited liability company he	<u>re</u> :	
the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
le:		
ADDRESS)		
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		CRETAR JON OF C
<u></u>		o~m
		D STATE RPORATION
registered office address on eaddress here:	our records, enter tr	ie namezoi tee nev
Enter Florida street address		
	, Florida	
City		Zip Code
	ing: ine limited liability Company he he words "Limited Liability Company he he words "Limited Liability Company he le: 4DDRESS) registered office address on a address here:	ing: In a limited Liability Company) In a limited Liability Company) In a limited Liability company here: In a limited Liability company here: In a limited Liability Company, "the designation "Liability Company," the designation "Liability Company, "Liability Company

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** Address **Type of Action** Name Peter A. Gonzalez, Esq. MGR 2333 Ponce de Leon Blvd., Ste. 302 Coral Gables, Florida 33134 Remove Remove □ Add Remove Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 2 2009 Dated Signature of a member or authorized representative of a member Peter A. Gonzalez Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00