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M. THOMAS

AUG 1 2 2009

EXAMINER

## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJE	СТ:	Lagarto A	zul Panama, LLC		
Name of Limited Liability Company					
		of Amendment and fee(s) are sulpondence concerning this matter			
	·		-		
Mid			chael R. Greenlee, Es	sq.	<del></del>
Name of Person Smith Frohwein Tempel Greenlee Blaha, LLC					
					,
			Firm/Company		
2 F			Ravinia Drive, Suite 700		
Address					超色厂
	Atlanta, Georgia 30346				TALLAHASSEE, FLORID
City/State and Zip Code					
mgree			reenlee@sentrylg.co	m	
For fur	ther information	concerning this matter, please	call:		7
	Mich	ael R. Greenlee	at (770)	709-00	70
		of Person	<del></del>	Daytime Telephor	
Enclose	ed 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 e	_	60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:		STREET/	COURIER ADD	RESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lagarto Azul P	<u>anama, LLC</u>	<u> </u>	<del></del>
(Name of the Limited Liability Compan (A Florida Limited Li	<u>y as it now appea</u> ability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Company (  Florida document numberL0900074787		August 4, 2009	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Limit" L.L.C."	ed Liability Comp	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	<del></del>	Ŧ,	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records, enter the	E name of the new
	•		
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida street addre	uss
	, Florida		
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			

If Changing Registered Agent, Signature of New 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 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 **Type of Action** Title **Name Address** MGR Gabriel Chernacov 7979 N.W. 21st Street. APT SJO 3505 ☐ Add Doral, Florida, 33122 US Remove ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 5 2009 Dated \_\_\_\_

Michael R. Greenlee, Esq., authorized representative of Eric F. Ensor, member

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00