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S. HAWKES

OCT 2 6 2009

EXAMINER

COVER LETTER

TO: Registration Division of C				
SUBJECT:	100	94 LF, LLC		
		ted Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
		CRAIG D. BLUME		
		Name of Person		
CRAIG D. BLUME, P.A. Firm/Company				
800 HARBOUR DRIVE				
	NA	PLES, FLORIDA 34103		
		City/State and Zip Code		
	E-mail address: (to be used for future annual report notifi	cation)	
For further information	concerning this matter, please c	all:		
CRAIG D. BLUME		at (239) Area Code & Daytime	417-4848	
Name	of Person	Area Code & Daytinia	e 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)	S60.00 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

1004 LE LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number		and assigned	
This amendment is submitted to amend the following:		CALLASS WAY	
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	OF PAR	
The new name must be distinguishable and end with the words "Limit".L.L.C."	ited Liability Company," the designation	on "LLC" or the previous	
Enter new principal offices address, if applicable:	4381 THIRD AVENUE NW	, -	
(Principal office address MUST BE A STREET ADDRESS)	NAPLES, FLORIDA 34119		
Enter new mailing address, if applicable:	4381 THIRD AVENUE NW		
Mailing address MAY BE A POST OFFICE BOX)	NAPLES, FLORIDA 34119		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	· —	er the name of the ne	
	-		
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 **Title** <u>Name</u> **Address Type of Action** MGR First Capital Consulting Gra 1243 11th Street North ☐ Add ✓ Remove Naples, Florida 34102 Edward P. Burnham MGR 4381 Third Avenue NW Naples, Florida 34119 ___Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **OCTOBER** 2009 Dated Signature of a member or authorized representative of a member MARK MCGUIRE Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00