

Sep. 24. 2010 1:41PM  
Division of Corporations

SALVATORI & WOOD

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**LO9000101663**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H10000205558 3)))



H100002055583ABC

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Fax Number : (850) 617-6383

From: Account Name : SALVATORI & WOOD, BUCKEL & WEIDENMAYER, P.A.  
Account Number : I20030000112  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
CORE CAPITAL, LLC**

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SALVATORI & WOOD

No. 3985 P. 2

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

**Core Capital, 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 October 21, 2009 and assigned  
Florida document number L09000101663.

This amendment is submitted to amend the following:

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

Core Property Capital, LLC

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)

FILED  
10 SEP 16 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE, 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:

Salvatori, Wood & Buckel

New Registered Office Address:

9132 Strada Place - Fourth Floor

*Enter Florida street address*

Naples

Florida

34108

*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

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SALVATORI & WOOD

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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

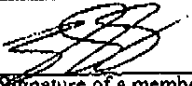
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<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
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated September 14 2010

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

T. Chadwick Lund, Manager

\_\_\_\_\_  
Typed or printed name of signer

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