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TRIAD

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Division of Corporations

L09 000106275

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC
Account Number : 120020000094
Phone : (770) 777-2091
Fax Number : (770) 220-1943

****Enter the email address for this business entity to be used for the annual report mailings. Enter only one email address please.****

Email Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JAN 19 AM 11:07

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10 JAN 19 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JACARANDA JV, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

A. LUNT

JAN 20 2010

Electronic Filing Menu

Corporate Filing Menu

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JACARANDA JV, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharon K. Gray

Name of Person

Triad Professional Services, LLC

Firm/Company

2050 Marconi Drive, Ste. 150

Address

Alpharetta, GA 30005

City/State and Zip Code

roxane@annualregistration.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon K. Gray

Name of Person

at (770)

777-2091

Area Code & Daytime 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)

☐ \$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

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2010 JAN 19 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

JACARANDA JV, 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 11/03/2009 and assigned
Florida document number L090000106275.

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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2010 JAN 19 AM 11:08
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:

New Registered Office Address:

Enter Florida street address

City, Florida 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	LF2 Jacaranda LP	4650 Donald Ross Rd. Ste. 200 Palm Beach Gardens, FL 33418	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	MCLF, LLC	4650 Donald Ross Rd. Ste. 200 Palm Beach Gardens, FL 33418 Attn: Peter Brock	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Robert Green	2851 John Street, Suite One Markham, Ontario L3E 5R7	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Peter Brock	4650 Donald Ross Rd. Ste. 200 Palm Beach Gardens, FL 33418	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	John Preston	4650 Donald Ross Rd. Ste. 200 Palm Beach Gardens, FL 33418	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Jeffrey Preston	4650 Donald Ross Rd. Ste. 200 Palm Beach Gardens, FL 33418	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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

Dated January 15, 2010

Signature of a member or authorized representative of a member

Robert S. Green

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JAN 19 AM 11:08

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