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EXAMINER



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ACCOUNT	NO.	:	I2000000195

REFERENCE : 221069

AUTHORIZATION

COST LIMIT

ORDER DATE: December 16, 2009

ORDER TIME : 12:28 PM

ORDER NO. : 221069-005

CUSTOMER NO: 7108498

DOMESTIC AMENDMENT FILING

NAME: TIMOTHY COFFIN HOUSE, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX____ CERTIFIED COPY PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER'S INITIALS:



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TIMOTHY COFFIN HOUSE, 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	ty Company were filed on Novemb	per 24, 2009 and assigned
Florida document number L09000112905	*	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	partition to grow the state of	
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		cords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	(Enter Fl	oridu street address)
<u>-</u>		, 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

1 .

Title	Name	Address	Type of A	ction
Mgrm	RUSSELL A. OASIS	1172 SOUTH DIXIE HIGHWAY SUITE 413 CORAL GABLES, FL 33146-2918	☑ Add ☐ Remove	:
	Vineyard Realty Holding	23/27 Seaton Place Charter Place St, Helier, Jersey JELLIJY	_☐ Add ☐ Remove	:
			Add Remove	:
			☐ Add ☐ Remove	:
			Add Remove	
<u></u>			Add Remove	
D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	<u></u>	
			···········	
Dated <u>DECE</u>	finall a. C	r authorized representative of a member		
	RUSSELL A. OASI			
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Page 2 of 2

Filing Fee: \$25.00