

L09000 118168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

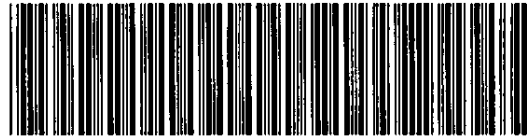
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100262665761

07/28/14--01044--020 **30.00

11:50
14 JUL 23 PM 3:37
S. OFT. COPY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **PETERSON DEVELOPMENT, 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:

JEANNIE GRAVERAN

Name of Person

3450 WEST 84 STREET

Firm/Company

STE 201

Address

HIALEAH, FL 33018

City/State and Zip Code

JGRAVERAN@JEANNIEHOMES.NET

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

For further information concerning this matter, please call:

JEANNIE GRAVERAN

Name of Person

at **(305) 557-1253**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

PETERSON DEVELOPMENT, 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 12/11/09 and assigned
Florida document number L09000118108.

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)

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	JEANNIE GRAVERAN	3450 WEST 84 STREET	<input checked="" type="checkbox"/> Add
		STE 201	<input type="checkbox"/> Remove
		HIALEAH, FL 33018	
MGR	NELSON GRAVERAN	3450 WEST 84 STREET	<input checked="" type="checkbox"/> Add
		STE 201	<input type="checkbox"/> Remove
		HIALEAH, FL 33018	
MGR	ALEXANDRA KHAMISSIAN	16820 NW 82 AVENUE	<input type="checkbox"/> Add
		MIAMI LAKES, FL 33018	<input checked="" type="checkbox"/> Remove
MGR	AMY KHAMISSIAN	16820 NW 82 AVENUE	<input type="checkbox"/> Add
		MIAMI LAKES, FL 33018	<input checked="" type="checkbox"/> Remove
MGR	MARIA GRAVERAN	7325 WEST 31 AVENUE	<input type="checkbox"/> Add
		HIALEAH, FL 33018	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

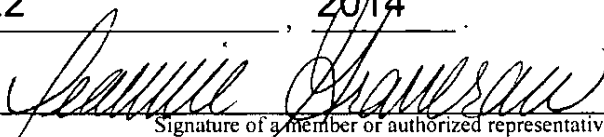
14 JUL 2014 PM 3:37
HIALEAH, FL 33018
MGR KHAMISSIAN, AMY
MGR GRAVERAN, MARIA

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JULY 22, 2014



Signature of a member or authorized representative of a member

JEANNIE GRAVERAN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

14 JUL 28 PM 3:37
TALLAHASSEE, FL 32301
CLERK OF COURT
JUL 28 2014