

L 09000120452

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COVER LETTER

TO: ☒ Registration Section
☐ Division of Corporations

SUBJECT: PHF Villas at Palm Bay, 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:

Khushboo Barot

Name of Person

Creative Choice Homes, Inc.

Firm/Company

8895 North Military Trail, Suite 101B

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

khushboo@creativechoice.net

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Khushboo Barot

Name of Person

at (561) 6277988 ext243

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

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

PHF Villas at Palm Bay, 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 12/18/2009 and assigned
Florida document number L09000120452.

This amendment is submitted to amend the following:

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

Globus Investments, 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)

5910 North Ocean Blvd.,

Ocean Ridge, Florida 33435

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5910 North Ocean Blvd.,

Ocean Ridge, Florida 33435

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:

James F. Caplan

New Registered Office Address:

5910 North Ocean Blvd.,

Enter Florida street address

Ocean Ridge

, Florida

33435

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.

(Signature)
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:

MGK= Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Progression Housing Foundation	2200 NW Corporate Blvd Suite 302 Boca Raton, FL 33431	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	James F. Caplan	5910 North Ocean Blvd Ocean Ridge, FL 33435	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

The effective date for this change should be 9/30/2010.

Dated January 13, 2011.

Signature of a member or authorized representative of a member

James F. Caplan
Typed or printed name of signee