LD900013417

(Requestor's Name)				
(104,000,000,000,000,000,000,000,000,000,				
(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:

L. SELLERS

MAR 1 9 2010

EXAMINER

Office Use Only



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SECRETARY OF STATE

COVER LETTER

Division of Corporations					
SUBJECT:	Shoreline Pop	erties of Destin, L.L	.C.		
	Name of Lim	ited Liability Company			
The enclosed Articles of Am	endment and fee(s) are su	bmitted for filing.			
Please return all corresponde	ence concerning this matte	r to the following:			
				\	
	·	Kevin M. Helmich			
-	_				
Kevin M. Helmich, P.A. Firm/Company					
-	4481 Legendary Drive, Suite 200 Address				
		Address			
	[Destin, Florida 32541			
•		City/State and Zip Code			
*	- he	lmich@destin-law.com	1		
*	E-mail address: ((to be used for future annual repo	rt notification)		
For further information conc	erning this matter, please	call:	,	• • •	
			050 1515		
Name of Pe	se Lantier	at (_850_)	650-4747 Daytime Telephone Nun		
Name of Pe	rson	Area Code & I	Dayume Telephone Nun	nder	
Enclosed is a check for the fo	ollowing amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Certification Ce	Filing Fee, ficate of Status & fied Copy tional copy is enclosed)	

MAILING ADDRESS: Registration Section

TO:

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



March 4, 2010

KEVIN M. HELMICH 4481 LEGENDARY DRIVE, STE. 200 DESTIN, FL 32541

SUBJECT: SHORELINE POPERTIES OF DESTIN, L.L.C.

Ref. Number: L09000121417

We have received your document for SHORELINE POPERTIES OF DESTIN, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 610A00005425

Leslie Sellers Regulatory Specialist II

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Shoreline Poperties of De	estin, L.L.C.
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ow appears on our records.)
,	
The Articles of Organization for this Limited Liability Company were file	d on and assigned
Florida document numberL09000121417	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
Shoreline Properties of Des	tin, L.L.C.
The new name must be distinguishable and end with the words "Limited Liabil" L.L.C."	ity Company," the designation "LLC" or the abbreviation
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 here:	ress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address 00 1
	Enter Florida street address & Florida
City	Zip Cade
New Registered Agent's Signature, if changing Registered Agent:	PATE ORIDA

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 = 1	Managing Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
			Add
			Add Remove
			— □ Add
			Remove
			Add Remove
			Add
			Add Remove
D. If amen	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.))
	. —		
Dated	February 22	2010	
	Signature of a me	ember or authorized representative of a member	
	Т	Kevin M. Helmich Typed or printed name of signee	
	-	·	

Page 2 of 2

Filing Fee: \$25.00