L100000004805

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10 MAY 10 PM 2: 41
SECRETARY OF STATE

J. BRYAN
MAY 1 1 2010

EXAMINER

COVER LETTER

TO:

TO:	Registration S Division of Co			
			N HOMES, LLC	
			ited Liability Company	
The end	closed Articles of	f Amendment and fee(s) are sul	bmitted for filing.	
Please 1	return all corresp	ondence concerning this matter	to the following:	
			BRIAN J JAMISON	
			Name of Person	
E		BI	RISTON HOMES, LLC	10 MY 10 PH 2: 41 SECRETARY OF STATE SECRETARY OF STATE
			Firm/Company	聖是一
140		1407	BARRINGTON CIRCLE	TILEU MAY 10 PH 2 FURTHERSSEE, B
			Address	100 × C
		STATE OF THE PERSON OF THE PER		
			AUGUSTINE, FL 32092 City/State and Zip Code	
			VJAMISON@ATT.N	
For furt	ther information	E-mail address: (concerning this matter, please o	to be used for future annual report notificati eall:	on)
	BRIA	AN J JAMISON	at (904) 33	4-9429
		of Person	Area Code & Daytime Te	
Enclose	ed is a check for t	he following amount:		
\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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		ration Section on of Corporations ox 6327	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DDICTONILIONEC ILO

OINO I	ON HOMES, LL	<u></u>
(Name of the Limited Liability (A Florida	Limited Liability Compar	y)
The Articles of Organization for this Limited Liability C Florida document number L1000004805	Company were filed on	JANUARY 13, 2010 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company	<u>here</u> :
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Co	mpany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		A S
(Principal office address MUST BE A STREET ADDI	RESS)	SS IN
	 	P M
Enter new mailing address, if applicable:		PR 2
(Mailing address MAY BE A POST OFFICE BOX)		ORTAI +
•		ę.
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		n our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
		Enter Florida street address
,		, 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 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

5

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ERIC PHILLIPS	58 BUTTERFIELD DRIVE PALM COAST, FL 32 13 7	Add Remove
			Add Remove
			Add Remove
			Add Remove
	<u></u>		AddRemove
			Add Remove
D. If amend	ding any other information, enter ch	ange(s) here: (Attach additional sheets, if necessa	Z o
_			TO MAY 10
 Dated		TLOR D.	T P D
	3,-	-00	
		BRIAN J JAMISON ped or printed name of signee	
	IV	pea or printea name of signee	

Page 2 of 2

Filing Fee: \$25.00