## 10000012061

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only



400202968404

04/26/11--01004--026 \*\*25.00

T. CLINE

APR 2 7 2011

**EXAMINER** 

## **COVER LETTER**

Division of Co					
SUBJECT:	VILLAGE C	CREEK #211, LLC.			
	Name of Limi	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		JOHN TODD  Name of Person	······································	-	
		Name of Person			
Firm/Company				2011 SEC	برهيدا ورين
3403 Winkler Avenue Extension			ARC AR	MITTER STATE OF	
•		Address		CRETARY LAHASSEI	m
Fort Myers, Florida 33916					C
City/State and Zip Code				STATE FLORID	***************************************
jt@sunsetclubproperties.com  E-mail address: (to be used for future annual report notification)			4:	DA S	
For further information	concerning this matter, please c	·	uion)		
John Todd Name of Person		at ( 239 ) 3	62-5020 Telephone Numbe	<del></del>	
		·	•		
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)	Certifie	ate of Status &	sed)

**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

VILLAGE CF	<u>REEK #211, LLC</u>	<u> </u>				
(Name of the Limited Liability Con (A Florida Limite	<u>ipany as it now appear</u> ed Liability Company)	rs on our records.)				
The Articles of Organization for this Limited Liability Comp.  Florida document numberL10000012061			and assigned			
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited l	iability company her	<u>'e</u> :				
VILLAGE CR	EEK #211, LLC					
The new name must be distinguishable and end with the words "L"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 registered agent and/or the new registered office address is	office address on o	LAHASSEE, FLORIDA	HAPR 26 AM : 0			
Name of New Registered Agent:	J	OHN TODD				
New Registered Office Address:	New Registered Office Address: 3403 Winkler Avenue Extenstion					
	Enter Florida street address					
	Fort Myers	, Florida	33916			
	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

Page 1 of 2

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 <u>Title</u> <u>Name</u> **Address Type of Action** GARRY LOAKES MGRM 2915 Winkler Avenue. #□02 Fort Myers, FL 33916 ✓ Remove The Zachary Family Trust MGRM 3775 Wales Avenue, N.W. ✓ Add Massillon Ohio 44646 ☐ Remove Remove Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 21 2011 Dated Signature of a member of authorized representative of a member

Page 2 of 2

JOHN TODD

Typed or printed name of signee

Filing Fee: \$25.00