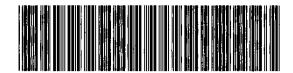
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUL - 7 2010

EXAMINER

COVER LETTER

TO: Registration of Division of	on Section f Corporations		•		· 41 ·	,
SUBJECT:	2111	PRR	LLC		• • •	
		Name of Limited	Liability Company	/		
The enclosed Articl			-			
Please return all cor	rrespondence conce	rning this matter to	the following:			
		HOWALD	Fre	Mici.		
		u-	Name of Person			
			Firm/Company	_		
•		-245 Y	Mr Grea	LOR	BLUB	
			_			
		Ft. M	YERS	F)	3390) (115: Com	-
		h	City/State and Zip Co	de Dialiaic	dis com	
4		E-mail address: (to b	e used for future annu	ual report notice	ication)	
	-	s matter, please call:	•			
How	ARY F	FREIDIN	at (239)	337	1918	_
N	ame of Person		Area C	Code & Daytim	e Telephone Number	- .
Enclosed is a check					;	
\$25,00 Filing Fe	ee\$30.00 Certif	Filing Fee &	\$55.00 Filing Fe Certified Copy (additional cop	/	\$60.00 Filing Fe Certificate of S Certified Copy (additional cop	Status & -
R D P	AAILING ADDRE Legistration Section Division of Corpora O. Box 6327 Callahassee, FL 323	tions	Regis Divis Clifto 2661	EET/COURI stration Section sion of Corpo on Building Executive Co hassee, FL 32	rations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2111 PRR	LLC
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were for Florida document number <u>LIOOOODJ3</u> 977	iled on 4/01/2010 and assigned
This amendment is submitted to amend the following:	SECR ISION
A. If amending name, enter the new name of the limited liability co	ompany here:
The new name must be distinguishable and end with the words "Limited Lia"L.L.C."	bility 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 as	III PINE RIDGE ROAD UAPLES FL 34109 Idress on our records, enter the name of the new
registered agent and/or the new registered office address here: Name of New Registered Agent:	D FREIDIN
New Registered Office Address: 2245	MCGREGDE BLUD. Enter Florida street address
Ft. Mys	Rorida 33901 Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to a the provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as provide being filed to merely reflect a change in the registered office addressing the company has been notified in writing of this change.	erformance of my duties, and I am familiar with and led for in Chapter 608, F.S. Or, if this document is

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 = Mana MGRM = Ma	nger naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DAVID MCNUTY	MAPLES FLORIDA 34	Add Remove
MGR	MARIE SHELTON	2111 PINE RIDGE Rd NAPLES FL 34109	Add Remove
			Add Remove
·			Add Remove
	·		Add Remove
·			Add Remove
D. If amendi	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	SECRETARY DIVISION OF CO
			OF STATE OR
Dated	Signature of a member of	or authorized-representative of a member	
-	HOWAR		-

Page 2 of 2

Filing Fee: \$25.00