L10000021880

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

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COVER LETTER

10:	Registration S Division of Co			
SUBJE	·CT·	KF Lal	ke Worth, LLC	
SOBJE			ited Liability Company	
The end	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please 1	return all corresp	ondence concerning this matte	r to the following:	
		Gree	g W. Dworzanowski, Esq.	1 2
			Name of Person	2010 HAR 29 SECRETARY TALLIAHASS
		Greg W. Dworzanowski, P.A.		
			Firm/Company	29 (SSE (SSE)
		HAR 29 PM II ORE LARY OF S LAHASSEE, FI		
			Address	PH 12: 54 OF STATE EE, FLORID
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notification	tion)
For furt	ther information	concerning this matter, please of	call:	
	Gred	j Dworzanowski	at (_813_)28	51-2900
		of Person	Area Code & Daytime T	
		the following amount:	—	
[∕]\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section on of Corporations Box 6327	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Lake Worth, LLC			
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now apped a Limited Liability Company)		
The Articles of Organization for this Limited Liabilit Florida document numberL10000021880		February 26, 20	and assign	ed
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liability company h	ere:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Con	npany," the designation		reviation
Enter new principal offices address, if applicable:			ARC	η
(Principal office address MUST BE A STREET AL	ODRESS)		29 4.55 5.55 5.55 5.55 5.55 5.55 5.55 5.5	
			MO TO	
			No.	
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX	2			
				
B. If amending the registered agent and/or re registered agent and/or the new registered office a		s our records, <u>ente</u>	r the name of	the new
Name of New Registered Agent:				
New Registered Office Address:		Enter Florida street d	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 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 = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Edwin Vdovets	122 South Michigan Ave., Suite 1000 CHICAGO, IL 60603 US	Add Remove
MGRM_	Mark O. Hackner	6040 Winterthur Drive ATLANTA, GA. 30328 US	Add ✓ Remove
MGR_	Edwin Vdovets	122 South Michigan Ave., Suite 1000 CHICAGO, IL 60603 US	_ √ Add _ Remove
MGR_	Mark O. Hackner	6040 Winterthur Drive ATLANTA, GA. 30328 US	Add Remove
D. If amendin	g any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	
		GRIUA	D 12: 54
Dated	March 23 , 2010	authorized representative of a member	
-	Ed	lwin Vdovets	
	Typed or	printed name of signee	

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Filing Fee: \$25.00