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TALL ANASSEE, FLORID

T. CLINE

AUG 3 0 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 301 Palomino LLC Name of Limited Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Marius J. Ged Name of Person		
Ellis, Ged + Bodden, P.A.	78 E	
7171 N. Federal Highway	AUG 27 AHASSE	TELET S
Boca Raton, FL 33487	TO F	 1 :
City/State and Zip Code Myed Dellis and ged. com E-mail address: (to be used for future annual eport notification)	18104 1816 18 03	
For further information concerning this matter, please call:		
Judd Brown at (561) 723-4182 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
(additional copy is enclosed) Certified	e of Status &	

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

	mino, UC		
(<u>Name of the Limited Li</u> (A Fl	ability Compan√as it now appears on our records.) orida Limited Liability Company)		
The Articles of Organization for this Limited Liabi	ility Company were filed on 3/8/10	and assig	gned
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the designation '		breviátion
Enter new principal offices address, if applicable	le:	SEY 1	₹
(Principal office address MUST BE A STREET A	4DDRESS)	AN H: 03	granes
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter e address here:	the name of	the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street ad	dress	
-	, Florida		
	City	Zin 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

Title.	<u>Name</u>	Address	Type of Action
M <u>GRM</u>	Marissa Brown	1156 Golden Road Delling fan, A 33414	Add Remove
			Add Remove
•	 		
<u>;</u>		7	Add Remove
			A'dd Remove
D. If amend	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	Add Remove
	<u> </u>		<u> </u>
Dated A	gust, 20		- -
		or authorized representative of a member	•
	Typed	or printed name of signee	
	~		

Page 2 of 2

Filing Fee: \$25.00