110000029967

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	()
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(Bu	siness Entity Name)
· (Do	cument Number)	
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10 MAR 22 PM 1: 37
SEPARASSEE FLORIDA

D. BRUCE

MAR 2 3 2010

EXAMINER

COVER LETTER `

то:		ation Sec of Corp	tion orations					
SUBJECT:Treasure Coast Property Ma				roperty Management L	LC			
				ited Liability Company				
The en	closed Art	icles of A	mendment and fee(s) are sub	omitted for filing.				
Please	return all	correspon	dence concerning this matter	to the following:				
				Daniel J Taddeo				
				Name of Person				
			Treasure Co	oast Property Managemen	t LLC			
	Firm/Company							
PO Box 880102				10 HAR	utrappa.			
	Address		SYL	R 22	Figure 100 And the first			
	Port St Lucie, Fl 34988-0102							
	City/State and Zip Code			E PE	PH -:			
			d	an@dantaddeo.com to be used for future annual report noti	(Cartion)	F STATE FLORIDA	:37	**************************************
For fur	rther inform	nation co	ncerning this matter, please c	•	incation)	E A		
		Dani	iel J Taddeo	at (772)	380-3250			
		Name of	Person		ne Telephone Numbe	r		
Enclos	ed is a che	ck for the	e following amount:					
\$25	5.00 Filing	Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certifie	ate of Sta	atus &	osed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COUR Registration Section Division of Corportion Building 2661 Executive Corportion Tallahassee, FL 3	orations Center Circle					

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> </u>	Treasure Coast Proper	rty Managem	ent LLC	
(<u>Na</u>	ne of the Limited Liability Compar (A Florida Limited L	iy as it now appear iability Company)	rs on our records.	
The Articles of Organization f	or this Limited Liability Company	were filed on	03/17/2010	and assigned
Florida document number	l10000029967			
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited liab	ility company her	<u>·e</u> :	
The new name must be distinguing"	shable and end with the words "Limi	ted Liability Compa	nny," the designation "I	LC" or the abbreviation
Enter new principal offices a	ddress, if applicable:			
(Principal office address MU	ST BE A STREET ADDRESS)			Fill 5
				District Name of the last of t
			1	SSET 22
Enter new mailing address,		<u> </u>		नि इस्ता
(Mailing address MAY BE A	<u>POST OFFICE BOX)</u>		<u></u>	
				3
	ered agent and/or registered of new registered office address her		our records, enter	the name of the new
Name of New Regis	tered Agent:			
New Registered Off	ce Address:	Er	nter Florida street add	lress
			, 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 = Mai MGRM = M	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Edward J Van Hore	3843 Sandlace Ct Port St.Lucie, Fl.34952	Add Remove
<u>MGRM</u>	Edward J Van Horn	3843 Sandlace Ct Port St Lucie, FL34952	Add Remove
			Add Remove
—			Add Remove
			Add Remove
	 		Add Remove
D. If amend	ling any other information, enter c	hange(s) here: (Attach additional sheets, if necessa	10 MAR 22 SECHETARY FALLAHASSE
 Dated	03/19/	2010	LED 2 PH 1: 37 SERFLURBA
	Signature of a mo	•	
		Daniel J Taddeo	

Page 2 of 2

Filing Fee: \$25.00