

L10000037577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

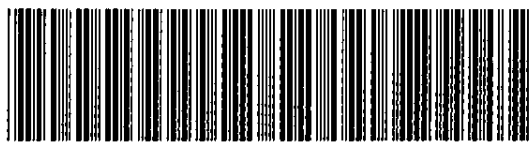
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

12/10/10--01024--014 \*\*25.00

D. BRUCE

DEC 13 2010

EXAMINER

DB

DELOACH-BRYANT, P.L.

Jordan A. DeLoach, Esq.  
jordan@deloachbryant.com  
Direct Fax: (407) 480-5186

December 6, 2010

Division of Corporations  
The Clifton Building  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Articles of Amendment to Articles of Organization

Dear Clerk:

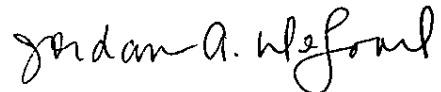
Enclosed please find the following:

- (1) Original Articles of Amendment to Articles of Incorporation of 5947 Shindler Drive, LLC;
- (2) Check in the amount of \$25.00 for the filing fee; and
- (3) A self-addressed, stamped envelope for confirmation of filing of the above-named Articles.

Thank you for your assistance in this matter. If you should have any questions, please contact my office.

I remain

Very truly yours,



Jordan A. DeLoach  
For the Firm

JD/cds  
enclosures

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

5947 Shindler Drive, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 7, 2010 and assigned Florida document number L10000037577.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

1220 East Story Road, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*Enter Florida street 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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 CLERK OF STATE  
 TALLAHASSEE, FLORIDA

Dated \_\_\_\_\_

*Kenneth M. Kelly*  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member

Kenneth M. Kelly  
 \_\_\_\_\_  
 Typed or printed name of signee