

L10000037738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

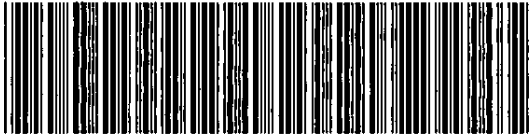
Special Instructions to Filing Officer:

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APR 16 2010

EXAMINER



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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
10 APR 15 PM 1:32

COVER LETTER

**TO: Registration Section
Division of Corporations**

**SUBJECT: Adler Winter Garden, 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:

Linda K. Adler

Name of Person

Adler Group, Inc

Firm/Company

1400 NW 107th Avenue 5th Floor

Address

Miami, Florida 33172

City/State and Zip Code

bfernandez@adlergroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Betty Fernandez

Name of Person

at (305)

392-4051

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

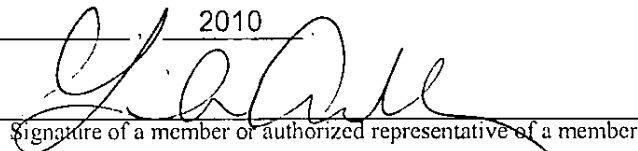
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Micheal M. Adler	1400 NW 107th Ave 5th Floor Miami, Florida	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Adler Winter Garden Manager, LLC	1400 NW 107th Ave 5th Floor Miami, Florida	<input checked="" 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.)*

Dated April 12 2010



Signature of a member or authorized representative of a member

Linda K. Adler

Typed or printed name of signee