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SECRETARY OF STATE

C. LEWIS

NOV 2 1 2011

EXAMINER

COVER LETTER

TO:	Registration Sect		N94		,
	Division of Corpo	orations			
4	• •	SEMINOLE CON	DO INVESTMENTS	SIIC	
SUBJE	ЕСТ:	· · · · · · · · · · · · · · · · · · ·	ited Liability Company	3 LLO	
		rano or Bin	nica Zinomiy Company		
	`				
The en	closed Articles of Ar	mendment and fee(s) are su	bmitted for filing.		
Please	return all correspond	ence concerning this matte	r to the following:		
			SADIQUE JAFFER		
			Name of Person		
		SEMINOLE	E CONDO INVESTME	NTS LLC	
			Firm/Company		
		942	ELM HARBOR COUR	₹T	
			Address		
		L	AKE MARY, FL 32746		
			City/State and Zip Code		
			layla@pibland.com		
	•	E-mail address: (to be used for future annual repo	rt notification)	
For fur	ther information con-	cerning this matter, please o	call:		
	LAYLA	TSESMELIS	at (407)	488-4	1772
	Name of P	erson		Daytime Teleph	none Number
Enclose	ed 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 en	closed)]\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2011 NOV 18 PM 2: 14

SEMINOLE CONDO INVESTMENTS LLECRETARY OF STATE
(Name of the Limited Liability Company as it now appears on old Recard See, FLORIDA
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liab	ility Company were filed on	MAY 12, 2010	_ and assigned
Florida document numberL1000005094	44		
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liability company he	ere:	
	N/A		
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Comp	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BC	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida street addre	ss
		, , 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.

MGR = Mai MGRM = M	nager Ianaging Member		
<u> </u>	<u>Name</u>	Address	Type of Action
MGRM	JOHN TSESMELIS	942 ELM HARBOR COURT LAKE MARY, FL 32746	Z Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
. If amend	ling any other information, enter c	change(s) here: (Attach additional sheets, if necess	sary.)
<u></u>			2011 NOV 18 SECRETARY
			mo a
ated	NOVEMBER 15,	<u>2011</u> .	FLORIDA

7

Page 2 of 2

Filing Fee: \$25.00