

L100000051043

(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:

Office Use Only



200185373142

09/30/10--01007--006 **25.00

FILED
10 SEP 30 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

OCT -1 2010

EXAMINER

PRESTON O. COCKEY, JR., P.A.

Attorney At Law

110 E. Madison Street
Suite 204
Tampa, Florida 33602

Tel: 813-275-5015
Fax: 813-275-5016
E-mail: gwilde@poclaw.com

September 27, 2010

Florida Secretary of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
10 SEP 30 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Articles of Amendment to Articles of Organization of SLR 101-102, LLC

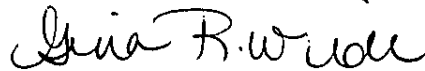
To Whom It May Concern:

Please file the enclosed original Articles of Amendment to Articles of Organization of SLR 101-102, LLC.

I have also enclosed a check in the amount of \$25.00 for the filing fee.

Please call me at (813) 275-5015 if you have any questions.

Very truly yours,



Gina R. Wilde, Legal Administrator
to Preston O. Cockey, Jr.

/grw
Enclosures

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: SLR 101-102, 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:

Michael E. Gratz
Name of Person

SLR 101-102, LLC
Firm/Company

601 Bayshore Blvd., Suite 650
Address

Tampa, FL 33606
City/State and Zip Code

mike@thehsgrp.com
E-mail address: (to be used for future annual report notification)

FILED
10 SEP 30 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michael E. Gratz at (813) 251-1221
Name of Person 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

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

SLR 101-102, 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 May 11, 2010 and assigned
Florida document number L10000051043.

This amendment is submitted to amend the following:

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

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)

601 Bayshore Blvd.

Suite 650

Tampa, FL 33606

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

601 Bayshore Blvd.

Suite 650

Tampa, FL 33606

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:

Michael E. Gratz

New Registered Office Address:

601 Bayshore Blvd., Suite 650

Enter Florida street address

Tampa

City

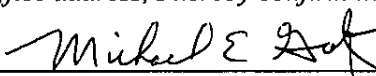
, Florida

33606

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

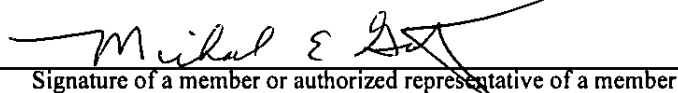
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Alberto L. Rogero	2514 W. Edgewood Drive Tampa, FL 33609	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Charles B. Funk	601 Bayshore Blvd. Suite 650 Tampa, FL 33606	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Jeffrey B. Meehan	601 Bayshore Blvd. Suite 650 Tampa, FL 33606	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Michael E. Gratz	601 Bayshore Blvd. Suite 650 Tampa, FL 33606	<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

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

FILED
10 SEP 30 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated September 22, 2010.


Signature of a member or authorized representative of a member

Michael E. Gratz

Typed or printed name of signee