L1000051298

(Requestor's Name)
<i>:</i>
(Address)
(Address)
(1441.000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
·
ļ

Office Use Only



500180952375

05/17/10--01032--001 **25.00

N. Collins MAY I & 2010

COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT:	DVP P	roperties, LLC			
		ited Liability Company		•	
	Amendment and fee(s) are su	· ·			
Please return all correspo	ndence concerning this matte	r to the following:			
		Rudy Polselli, Jr.			
Name of Person					
DVP Properties, LLC					
		Firm/Company			
2000 PGA Blvd.,Suite 3230				_	
		Address			
	Palm Beach Gardens, FL 33408 City/State and Zip Code				
	rpols	selli@carolinaccorp.co to be used for future annual repo	m		
			rt notification)		
For further information co	oncerning this matter, please of	call:			
	y Polselli, Jr.	at (_561)	373-2995		
Name of	Person	Area Code & I	Daytime Telephone Numbo	er	
Enclosed is a check for the	e following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certifie	ate of Status &	
MAILI	NG ADDRESS:	STREET/C	OURIER ADDRESS:		

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO

FILED. ARTICLES OF ORGANIZATION 10 MAY 17 AM II: 00

OVP Prope (Name of the Limited Liability Compa (A Florida Limited I	Prties, LLC Ny as it now appears on our records. Liability Company)		
Γhe Articles of Organization for this Limited Liability Company	were filed on May 12, 2010 and assigned		
Florida document numberL10000051298			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and end with the words "Limit" L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	2000 PGA Blvd.,Suite 3230		
(Principal office address MUST BE A STREET ADDRESS)	Palm Beach Gardens, FL 33408		
Enter new mailing address, if applicable:	2000 PGA Blvd.,Suite 3230		
Mailing address MAY BE A POST OFFICE BOX)	Palm Beach Gardens, FL 33408		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Florida		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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:

<u> Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			□ D amagua
D. If amen	ding any other information, ent	ter change(s) here: (Attach additional shee	ts, if necessary.)
			ART O
	 May 14		AM II: 00 OF STATE ELFLORIDA
Dated	May 14	2010	≫ ,

Page 2 of 2

Filing Fee: \$25.00