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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED
2011 DEC -7 AM II: 06

J. BRYAN

DEC -8 2011

EXAMINE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LNO Orlando East, 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:
Pichie Per)mon Name of Person First Company
Firm/Company
27805 SW 197 Ave.
Homestecd FL 33031 City/State and Zip Code richie medalliontrees. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richie Perlimon at (305) 799 0771 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\ \text{Certified Copy} \\ \text{(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

MINDER THE ST. iability Company as it now appears on our records.) lorida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05)20 /2010 and as Florida document number <u>L1000005462</u> S. 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

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

Page 1 of 2

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>		Address	Type of Action
MG <u>RM</u>	120 08U	ando west, lic	4023 avelon Road Winter Gorden, FL 34787	Add Remove
MGRM	Lake No	na Outdoors, uc	14645 Bossy Creek Rd. Orlendo, Fl 32824	Add Remove
				Add Remove
				Add Remove
				Add Remove
				Add Remove
D. If amer	nding any other i	nformation, enter change(s) here: (Attach additional sheets, if necessary.)	
- -			TAILL AHASS	FIL 2011 DEC
Dated	Decemb	yer S 2011	SEE, FLORE	MI : 06
<u></u>		Signature of a member or	authorized representative of a member	т б
	Stept	un T. Gerris	printed name of signee	

Page 2 of 2

Filing Fee: \$25.00