

L10000062227

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. O. ...

JUN 21 2010

FORLIZZO LAW GROUP, P.A.

ATTORNEYS AT LAW

ROBERT A. FORLIZZO
Admitted in Florida, New York
AND CALIFORNIA

Email: bob@forlizzolawgroup.com

June 17, 2010

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

VIA FEDERAL
EXPRESS

RE: **Summerville Retail, LLC**

Dear Sir/Madam:

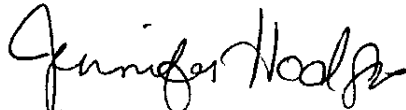
Please find enclosed for filing an Articles of Amendment to Articles of Organization for **Summerville Retail, LLC**.

Enclosed please find our firm's trust account check #5847, in the amount of \$55.00 for the filing fees and certified copy charges. I would appreciate it if you could return the filed documents to me at your earliest convenience by overnight courier.

Thank you for your cooperation in this matter and if you have any questions, please feel free to contact me.

Very truly yours,

FORLIZZO LAW GROUP, P.A.



Jennifer Hodges, Paralegal to
Robert A. Forlizzo

RAF/jnh
Enclosures

F:\Word\Bob\CONNOR\Paradise Entities\Summerville Retail, LLC\FL Dept. of State.ArticlesAmendedLLC.doc

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SUMMERVILLE RETAIL, 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:

ROBERT A. FORLIZZO, ESQ.

Name of Person

FORLIZZO LAW GROUP, P.A.

Firm/Company

2903 RIGSBY LANE

Address

SAFETY HARBOR, FL 34695

City/State and Zip Code

cernst@paradiseventuresinc.com

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

For further information concerning this matter, please call:

ROBERT A. FORLIZZO

Name of Person

at (**727**)

669-0550

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

FILED
10 JUN 18 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUMMERVILLE RETAIL, 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 06/10/2010 and assigned
Florida document number L10000062227

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

_____, 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.

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:

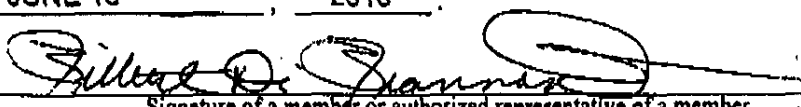
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGMR	INVESTMENT PROPERTIES REVOCABLE TRUST	2901 RIGSBY LANE SAFETY HARBOR, FL 34695	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGMR	ADJ DIG, LLC	107 HAMPTON ROAD, SUITE 200 CLEARWATER, FL 33759	<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):

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 10 JUN 18 AM 11:51
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated JUNE 16, 2010



Signature of a member or authorized representative of a member

GILBERT DIGIANNANTONIO

Typed or printed name of signee