L10000069112

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SECRETAIN OF STATE
ALLAHASSEE, FLORIDA



EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 14, 2010

CRAIG LYON FIFTH AVENUE ADVISORS 350 5TH AVE S #203 NAPLES, FL 34102

SUBJECT: PENINSULA FUND ADMINISTRATORS, LLC

Ref. Number: L10000069112

We have received your document for PENINSULA FUND ADMINISTRATORS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 510A00021783

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Peninsula Fund Administrators, 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:
Craig W. Lyon Name of Person
Fifth Avenue Advisors, LCC
350 5th Ave 5 # 203
For further information concerning this matter, please call:
For further information concerning this matter, please call:
Kristi Zammi + at (239) 262-5248 Sin Sin Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$60.00 Filing Fee, \text{Certified of Status & 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 ARTICLES OF ORGANIZATION **OF**

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on	Peninsula (Name of the Limited	HUND HO	MINISTA	210(5 n our records.)	_	
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 "LLC." 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 above the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: The Away We Advisors, UCC New Registered Office Address: The Away We Advisors, UCC New Registered Office Address: Florida 34102 Zip Code	(A	Florida Limited Liabi	lity Company)	i our records.		
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naples Florida 34102 Zip Code	New Registered Office Address:	350 5	5th Ave	S#203		
City Zip Code		ام م	Enter .	Florida street address		
New Registered Agent's Signature, if changing Registered Agent:		- napi	ity		<u> 0 2 </u>	_
·	New Registered Agent's Signature, if changing l	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

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 **Title** <u>Name</u> **Address** Type of Action ☐ Add Remove Add 🗌 Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

Typed or printed name of signee

Page 2 of 2

Signature of a member or authorized representative of a member

Filing Fee: \$25.00