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• (Requ	uestor's Name	e)
, (A.d.)		
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(City/s	State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	ame)
(Docu	ıment Numbe	r)
Pertified Copies	Certificate	es of Status
Special Instructions to Fil	ling Officer:	

A. LUNT

JAN 11 2010

EXAMINER

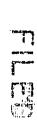
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COVER LETTER

	ion Section of Corporations				
· SUBJECT:	84 WEST	PARTNERS LLC			
	Name of Lim	Name of Limited Liability Company			
	les of Amendment and fee(s) are subtrespondence concerning this matter	-			
		JUDY SHERMAN			
		Name of Person			
	ST	STILES CORPORATION			
		Firm/Company			****
				ZOII JAN IO	1
	301 E	301 E. LAS OLAS BOULEVARD			
	•	Address	,		
	FORT	LAUDERDALE, FL 33301		5 P	,
	·	City/State and Zip Code			
	JUDY.	JUDY.SHERMAN@STILES.COM			
	E-mail address: (to be used for future annual report notific	eation)		
For further informa	ntion concerning this matter, please	call:			
	JUDY SHERMAN	at (_954_)	327-9156		
Name of Person		Area Code & Daytime			
Enclosed is a check	c for the following amount:	·			
\$25.00 Filing F	ee \$\int_\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
	MAILING ADDRESS:	STREET/COURIE Registration Section			

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 ARTICLES OF ORGANIZATION OF

84 WES	T PARTNERS LLC	<u> </u>	<u></u>		
(Name of the Limited Liability (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability C	Company were filed on	JULY 9, 2010	and assig	ned	
Florida document number L10000072379	<u>'</u>				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	ited liability company he	<u>re</u> :			
The new name must be distinguishable and end with the wo'L.L.C."	rds "Limited Liability Comp	any," the designation "Ll	LC" or the abl	breviatio	
Enter new principal offices address, if applicable:	 		स्त्र 🛼		
Principal office address MUST BE A STREET ADDI	RESS)				
				Statement Statem	
Enter new mailing address, if applicable:				# 	
Mailing address MAY BE A POST OFFICE BOX)				E. 23	
			2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	45,31410 -	
			(4)	. =	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		our records, <u>enter th</u>	e name of	the nev	
egistereti agent and/or the new registereti ornee aud	ress nere.				
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> **Type of Action** <u>Name</u> **Address** MGR Terry W. Stiles 300 SE 2ND STREET ☐ Add FORT LAUDERDALE, FL 33301 Remove Patriotic Enterprises LLC MGRM 301 E. LAS OLAS BLVD. ✓ Add Remove FORT LAUDERDALE, FL 33301 ☐ Add Remove Ādd ⊊ Remove iiiAdd ⊒ € Remoye ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JANUARY 5** 2011 Dated_ Signature of a member or authorized representative of a member TERRY W. STILES Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00