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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	Collinwood Holdings LLC Name of Limited Liability Company				
The enclosed Articles	of Amendment and fee(s) are sul				
	spondence concerning this matter	-			
	Lisette Salazar, Esq. Name of Person				
		Name of Ferson			
	Lisette Pie Salazar PA			TA S	
	Firm/Company			Sells	
				2010 SEP 27 SEGRETARY	
	200 Crandon Blvd. #311			ZI SSE SSE	
		7100.000			
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		City/State and Zip Code		ORIBI	
	P mail addrass:	osalazarlaw@aol.com to be used for future annual report no	otification)		
3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	AND THE PERSON OF THE PERSON O		onneation) "	* * .	
For further informatio	n concerning this matter, please o	call:	E		
. ,	isette Salazar	at (_305)	361-6161		
	e of Person		time Telephone Number		
Enclosed is a check for	r the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	sed) Certified	ite of Status &	
Reg Divi P.O	ILING ADDRESS: istration Section ision of Corporations Box 6327 ahassee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Collin	nwood Holdings LLC		
(<u>Name of the Limited Liah</u> (A Flor	ility Company as it now appear ida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liabili	ty Company were filed on	08/30/2010	and assigned
Florida document numberL10000090930	<u>) </u>		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :	
COLLING	SWOOD HOLDINGS LLC		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compa	ny," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable			
(Principal office address MUST BE A STREET AL	ODRESS)		ASSET 27
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	GF STAF
(Mailing address MAY BE A POST OFFICE BOX	<u></u>		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office agent: New Registered Office Address:	address here:	our records, <u>enter t</u> ter Florida street add	
·	Cu.	, Florida	7: C I
	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>	Address	Type of Action
mgr	Kirsten Emily Margaret Phill ρ≤	462 Woodcrest Road Key Biscayne, FL 33149	Add Remove
			Add Remove
			And And Remove
· · · · · · · · · · · · · · · · · · ·			Add Spanove
		ORIĐA	
			Add Remove
D. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_
_			
			<u> </u>
Dated	September 23 , 201 Signature of a member of	or authorized representative of a member	
	Liset	te Salazar, Esq.	

Page 2 of 2

Filing Fee: \$25.00