

L100000091089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

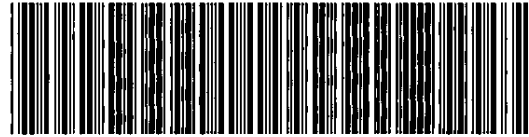
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

L. SELLERS
SEP 29 2010
EXAMINER

Office Use Only



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09/27/10--01004--014 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 SEP 27 PM 2:13

FILED

KAPLAN LAW FIRM, P.L.

ATTORNEY AND COUNSELOR AT LAW

130 Remington Drive, Suite 1000
OVEDO, FLORIDA 32765

Tel (407) 706-6700 • Fax (407) 706-6701

WWW.KAPLANLAWFIRM.US
CPAGE@KAPLANLAWFIRM.US

September 24, 2010

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

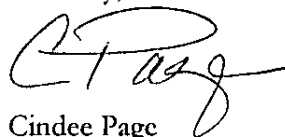
Re: Orlando Homes 4 Rent, LLC

To Whom It May Concern:

Enclosed please find this firm's check number 1424 in the amount of \$25.00 and payable to Florida Department of State, together with the Articles of Amendment to Articles of Organization for the above referenced entity.

If you have any questions or require anything additional in this regard, please do not hesitate to contact me.

Sincerely,



Cindee Page
Legal Assistant

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ORLANDO HOMES 4 RENT, 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:

JEFFREY L. KAPLAN

Name of Person

KAPLAN LAW FIRM, P.L.

Firm/Company

130 REMINGTON DRIVE, SUITE 1000

Address

OVIEDO, FL 32765

City/State and Zip Code

JKAPLAN@KAPLANLAWFIRM.US

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

For further information concerning this matter, please call:

JEFFREY L. KAPLAN

Name of Person

at (407)

706-6700

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**

ORLANDO HOMES 4 RENT, 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 8/30/2010 and assigned
Florida document number L10000091089.

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)

Av. Bonampak Lote 29-01,
Mz. 20 SM 3 bonampak 77 mezzanine 1
Cancun Quintana Roo, C.P. 77500 Mexico

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

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10 SEP 27 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>
_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

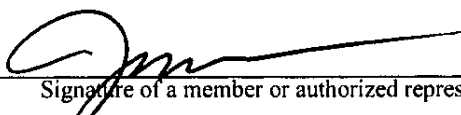
_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated SEPTEMBER 24, 2010.



 Signature of a member or authorized representative of a member
JEFFREY L. KAPLAN, Authorized Representative of Member

 Typed or printed name of signee