L10000113848

,
(Requestor's Name)
(Address)
(A.L.
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusiness Fatir Mars)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
· ·

Office Use Only



300207987133

300207987133 05/23/11--01025--021 **55.00

SECRETARY OF STATE TACKAHASSEE, FLORIDA

J. SAULSBERRY EXAMINER JUN 2 4 2011

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

'Division' of Corpo	rations				
SUBJECT:	1 VIII C	terpuses			
	Name of Limi	ted Liability Company			
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.			
Please return all correspond	lence concerning this matter	to the following:			
	Ricard	Name of Person NERPRISES Firm/Company			
	Brittle E	Nterprisos			
		Firm/Company			
	7 LAI	8 60		20 TA:5	
		Address	! !		444
	Boynto Re	ach, Fl.	· · · · · · · · · · · · · · · · · · ·	2011 JUN 23 ASEURETARY	مَعَ ا ماده دورا محمد و ا
		City/State and Zip Code	!	N 23 PM 2: 10 TARY OF STATE ASSECUTION	,
	* * 7 11 /			F	, w e t
	•	o be used for future annual report notification	on)	PM 2: 10	* an ar
For further information con-	cerning this matter, please ca	all:		St. o	
Ricardo Br		at (56/) 305-4/2	22		
Name of Po	erson	Area Code & Daytime Tel	lephone 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)	Certificate Certified C (additional	of Status &	ed)
Registration	G ADDRESS: on Section of Corporations	STREET/COURIER . Registration Section Division of Corporation			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

BRITILE ENTERPRIS		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L/0000//3848</u> .	y were filed on NOV. OZ	2, 2010 _ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial		
BRITHLE ENTERPRISES TA CONTROL The new name must be distinguishable and end with the words "Lim	ast 2 COAST F	RESORTS LLC.
The new name must be distinguishable and end with the words "Lim" L.L.C."	nited Liability Company," the d	lesignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	- - .	2011 .
(Principal office address MUST BE A STREET ADDRESS)		JUN 23
		JUN 23 PM 2: AHASSEE FLOO
Enter new mailing address, if applicable:		7. STA 2:
(Mailing address MAY BE A POST OFFICE BOX)		TE TE
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our recor	rds, enter the name of the new
Name of New Registered Agent:	N/A N/A	
New Registered Office Address:	[la 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

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 = N	Annaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_
		AH AS SSEE	****
 Dated			o Trans
	Signature of a member	r or authorized representative of a member	
	RICORDO TO	SRITTLE For printed name of signee	

Page 2 of 2

Filing Fee: \$25.00