

# L11000027826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

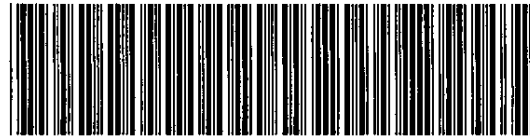
(Business Entity Name)

(Document Number)

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13 JAN -4 PM 12:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER  
JAN - 8 2013

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SILVER PEACOCK REALTY 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:

**Anne-Marie DeNapoli**

Name of Person

**SILVER PEACOCK REALTY LLC**

Firm/Company

**Post Office Box 833**

Address

**Niagara-on-the-Lake, ON Canada L0S 1J0**

City/State and Zip Code

**annemarie@silverpeacockgroup.com**

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

For further information concerning this matter, please call:

**Anne-Marie DeNapoli** at ( **289** ) **868-9360**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

**SILVER PEACOCK REALTY LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
13 JAN -4 PM 12:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/04/2011 and assigned  
Florida document number L11000027826.

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)

421 Johnson Street  
Niagara-on-the-Lake, Ontario Canada L0S1J0

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

Post Office Box 833  
Niagara-on-the-Lake, Ontario Canada  
L0S 1J0

**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:	<u>David Pantin</u>
New Registered Office Address:	<u>8129 Whitford Court</u>
	<i>Enter Florida street address</i>
	<u>Windermere</u> , Florida <u>34786</u>
	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.*

*W.L.*

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>
<u>MGR</u>	<u>Craig Jones</u>	<u>PO BOX 833, LOS1JO NIAGARA ON THE LAKE ON L0S1J0</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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Dated January 3, 2013



Signature of a member or authorized representative of a member

Anne-Marie DeNapoli

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**