L11000034249

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J. SAULSBERRY EXAMINER

APR 7 2011

COVER LETTER

TO:	Registration So Division of Co						
SUBJECT: FRP WEST			ST PALM IV, LLC				
		Name of Lim	ited Liability Company				
The end	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please r	eturn all correspo	ondence concerning this matter	r to the following:				
		A	NDREW R. COMITER				
			Name of Person				
COMITER, SINGER, BASEMAN & BRAUN, LLP		, LLP					
			Firm/Company				
		380	I PGA BLVD, SUITE 604				
			Address		JAT.	201	
		PALM BEAG	CH GARDENS, FLORIDA 334	1 10	ECRETARY OF STATE LLAHASSEE, FLORIDI	2011 APR -6	
			City/State and Zip Code		ASS	R -€	Lacramic.
		ACOMITE	R@COMITERSINGER.COM		133 404		
			to be used for future annual report notificat	ion)	FLO	=×	
For furt	her information of	concerning this matter, please of	call:		REC	PH 1:47	
		EW R. COMITER	ai\ /	26-2101			
	Name o	of Person	Area Code & Daytime T	elephone Number			
Enclose	d is a check for t	he 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 Filin Certificate Certified (additional	e of Status Copy		i)
	Registr	JING ADDRESS: ration Section on of Corporations	STREET/COURIER Registration Section Division of Corporati				

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

FRP	<u>WEST PALM IV, LLC</u>		
(Name of the Limited Lial (A Flor	bility Company as it now appearida Limited Liability Company)	rs on our records.)	
(·····, ·····,		
The Articles of Organization for this Limited Liabili	ty Company were filed on	03/22/2011	and assigned
Florida document number L11000034249	9		
This amendment is submitted to amend the followin	g:		
A. If amending name, enter the new name of the	limited liability company her	<u>·e</u> :	
GREENSPRINGS	PROPERTY MANAGEM	ENT, LLC	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compa	any," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable	<u></u>		
(Principal office address MUST BE A STREET A)	DDRESS)		
		A	20 ZO
	-		
Enter new mailing address if annicellar		7 2	A P
Enter new mailing address, if applicable:		<u> ပ</u>	2 6 F
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
			S S
B. If amending the registered agent and/or re	egistered office address on o	our records, <u>enter </u>	he name of the new
registered agent and/or the new registered office	address here:		
Name of New Registered Agent:	·		·····
New Registered Office Address:			
	En	ter Florida street add	ress
		. 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Floridia Properties, LLC	3801 PGA Blvd Suite 604 Palm Beach Gardens, FL 33410	Add Remove
			Add Remove
<u> </u>			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary	ZOII A
			FILED IPR-6 PM 1:47 ETARY OF STATE. HASSEE FLORIDE.
Dated	Auhlen Manner of a men	her or authorized representative of a member	> 7
	ANDREW R. COMIT	ER, AUTHORIZED REPRESENTATIVE	

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00