·LII 0000 43154

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11 MAY - 5 PH 7: 19
SEURINGER OF STATE

B. BOSTICK
MAY - 9 2011
EXAMINER

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	LGDV In	vestments, LLC			
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	oondence concerning this matte	r to the following:			
	Je	ffrey E. Lehrman, Esq.		_	
Name of Person					
Jeffrey E. Lehrman, Esq. P.C.					
Firm/Company					
2222 Ponce de Leon Blvd., Ste 200					
		Address			
	С	oral Gables, FL 33134		77.0	_
		City/State and Zip Code		E	T EL
	E-mail address: (elesq@bellsouth.net to be used for future annual report not	(fication)		E I
For further information	concerning this matter, please of	·	,	SEE	O (
<u></u>	E. Lehrman, Esq.	at (305) Area Code & Daytin	460-4447	TLONE TLONE	
Enclosed is a check for	the following amount:			Þ	
✓ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certified	ite of Status	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	on orations enter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LGDV Invest (Name of the Limited Liability Compa (A Florida Limited I	tments, LLC inv as it now appears on our re- Liability Company)	cords.)		
The Articles of Organization for this Limited Liability Company Florida document numberL11000043154	were filed onApril 11	, 2011 and assigned		
This amendment is submitted to amend the following:	·			
A. If amending name, enter the new name of the limited liab	oility company here:	•		
St. Hugh Inves	tments, LLC			
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the des	ignation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	2222 Ponce de Leon E	3lvd., Ste 200 =		
(Principal office address MUST BE A STREET ADDRESS)		THE TY		
Endougue and Proceedings of the Control of the Cont	Comp on shows			
Enter new mailing address, if applicable:	Same as above.			
(Mailing address MAY BE A POST OFFICE BOX)		DE 9		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		s, <u>enter the name of the new</u>		
New Registered Office Address:	Enter Florida 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

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 = MS $MGRM = I$	Managing Member			
<u>Title</u>	Name	<u>Address</u>	Typ	e of Action
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D. If amen	ding any other information, enter cl	nange(s) here: (Attach additional sheets, if necessar	v. 12 5	
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_	110011			
Dated	man 4	2011		
	Significant vivo	npoer or authorized representative of a member		_
		effrey E. Lehrman, Esq.		
	T	yped or printed name of signee		-
		Page 2 of 2		

Filing Fee: \$25.00