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(Requestor's Name)						
(Ad	dress)					
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(Cit	y/State/Zip/Phone	e #)				
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(Business Entity Name)						
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SECRETARY OF STATE
TALL AHASSEE, FLORID A

B. BOSTICK

APR 2 4 2013

EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Sarasota National CDD Holdings, 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:

Jason E. Merritt

Name of Person

Hopping Green & Sams, P.A.

Firm/Company

119 South Monroe Street, Suite 300

Address

Tallahassee, FL 32301

City/State and Zip Code

jasonm@hgslaw.com

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

For further information concerning this matter, please call:

Jason E. Merritt

850, 222-7500

Name of Person

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

Sarasota National CDD Holdings	s, LLC					
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our record a Limited Liability Company)	<u>s.</u>)				
The Articles of Organization for this Limited Liability	Company were filed on April 14, 2011	and assigned				
Florida document number L11000044907						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lin	mited liability company here:					
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the designa	tion "LLC" or the abbreviation				
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADL	DRESS)					
		SECTION 1				
		APR APR				
Enter new mailing address, if applicable:		R2				
(Mailing address MAY BE A POST OFFICE BOX)						
		7.0				
		表於 9 ~				
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		nter the name of the new				
						
Name of New Registered Agent:						
New Registered Office Address:						
	Enter Florida street address					
	, Flor					
	City	Zi p 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 = Manager MGRM = Managing Member

ų1, **.....**¹

<u>Title</u>	<u>Name</u>	Address Type of Action
MGR	Craig Wrathell	6131 Lyons Road, Suite 100
		Coconut Creek, FL 33073 Remove
MGR	Wrathell, Hunt & Associates, LLC	6131 Lyons Road, Suite 100
		Coconut Creek, FL 33073
		Add
		Remove
		ALCRE AND Remove
		SEE, FLORITS
		Remove
		Add
		Remove

D. 1	If amending any	other information, enter ch	ange(s) here: (Attach additional sheets, i	f necessary.)
Date	ed April 23		2013	_ 	
				<u> </u>	
	Craig	Wrathell, as Managing Me	ember of Wrath		
		T	yped or printed no	ame of signee	

Page 3 of 3

Filing Fee: \$25.00

2013 APR 23 AM 10: 2: