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D. BRUCE
APR 28 2011
EXAMINER

## **COVER LETTER**

P.O. Box 6327 Tallahassee, FL 32314

TO: Registration S Division of Co				
SUBJECT:	Terra Agit	o Properties, LLC		
	Name of Lim	ited Liability Company		
•				
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	pondence concerning this matte	r to the following:		
		Jose A. Cantero		
		Name of Person		
		Jose A. Cantero, P.A.		
		. Firm/Company		
		12601 Avalon Road		
		Address		
	W	inter Garden, FL 34787		
•		City/State and Zip Code	_	
	E-mail address: (	canteropa@aol.com to be used for future annual report notifi	cation)	
For further information	concerning this matter, please	call:		MPR 27 MH AHASSEE, FI
Jo	se A. Cantero	at ( 407 )	239-4565	Yer spa
Name	of Person	Area Code & Daytime	Telephone Number	* 30 RIGA
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)	) Certified (	of Status &
MAILING ADDRESS: Registration Section Division of Corporations		STREET/COURI Registration Section Division of Corpora	n	
P.O. Box 6327		Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	<u>erra Agito Pi</u>	roperties, LLC			
(Name of the Limite	<u>d Liability Compa</u> A Florida Limited	a <b>ny as it now appea</b> Liability Company)	rs on our records.)		
The Articles of Organization for this Limited I Florida document numberL1100004		y were filed on	April 22, 2011	and assigned	
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited lia	bility company hei	<u>·e</u> ;		
	N//	Ą			
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	nited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if appli	N/A				
(Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		N/A		FILED PR27 MB: 3 FARY OF STATE	
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>enter th</u>	S o	
Name of New Registered Agent:	N/A			<u> </u>	
New Registered Office Address:	N/A				
<del></del>	<del></del>	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 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 **Type of Action** Address <u>Title</u> <u>Name</u> Marilyn Cantero **MGRM** 12601 Avalon Road Winter Garden, FL 34787 ☐ Add Remove ☐ Add ☐ Remove ☐ Add Remove □Add Remove  $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 25 Dated Signature of a member or authorized representative of a member

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Jose A. Cantero
Typed or printed name of signee

Filing Fee: \$25.00