L11000073181

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B. BOSTICK
JUL 27, 2011

EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	Corporations					
SUBJECT:	WINTER	PARK WEST LLC				
	Name of Lim	ited Liability Company				
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.				
Please return all corres	spondence concerning this matte	r to the following:				
	RA	ANDALL C. SMITH ESC)			
		Name of Person				
		SMITH BROWN PL				
		Firm/Company				
	533 VERSAILLES DRIVE SUITE 100		E 100			
		Address				
	MAI	TLAND FLORIDA 3275	51			
		City/State and Zip Code				
	RANDALLSI	MITH@SMITHBROWNL	_AW.COM	,		
		to be used for future annual repor	t notification)		=	
For further information	concerning this matter, please	call:				er vegen,
RA	NDALL SMITH	at (407)	599-0002	50 f	11 JUL 25	4 andres g tales
Name	e of Person		aytime Telephone Number	rm.	Ď	incom F
Enclosed is a check for	the following amount:			STATE	PH 2: 11	44 <u>124</u> 488
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	\$60.00 Filis Certificat Certified (additional	e of Statu Copy		ed)
Regi: Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	Registration S Division of C Clifton Buildi	orporations			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WINTER PAR				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	Liability Company)	is on our records,		
The Articles of Organization for this Limited Liability Company	were filed on	06/23/2011	and assigned	
Florida document numberL11000073181				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company her	<u>·e</u> :		
The new name must be distinguishable and end with the words "Lim	ited Liability Compo	any " the designation "	11 C" or the abbrevi	 atio
"L.L.C."	ned Elabinty Compa	my, the designation	DEC Of the above via	ttio.
Enter new principal offices address, if applicable:	5617 SOUTH	ORANGE AVE	NUE	_
(Principal office address MUST BE A STREET ADDRESS)	EDGEWOOD), FLORIDA 3280	<u> </u>	
	 		<u> </u>	
Enter new mailing address, if applicable:			55 - 20	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter</u>	the name of the	nev
registered agent and/or the new registered office address her	<u>c</u> .			
Name of New Registered Agent:				_
New Registered Office Address:		771 +1	1	
	Enter Florida street address			
	City	, Florida	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 = M MGRM =	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			_□Add _□Remove
			Add Remove
D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	94 2
Dated	JULY 25 , 20	<u>11</u>	
	, What	lu_	· · · ·
		or authorized representative of a member	
	Typed	L C. SMITH, ESQUIRE or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00