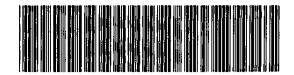
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Office Use Only



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EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SHBJI	ECT:	4225 LANE	HOLDINGS LLC		
ос до			ted Liability Company		
The en	nclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
			KAREN WILLIAMS		
			Name of Person		
			Firm/Company		
5			29 BROWDER ROAD)	
			Address TANDA 51, 00005		
			TAMPA FL 33625 City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
		E-mail address: (i	MW2009@MSN.COM to be used for future annual repo	rt notification)	
For fu	rther information	concerning this matter, please c	all:		
		REN WILLIAMS	at (813)	679-3146 Daytime Telephone Number	
	Name	or reson	Alea Code &	Bayunic Telephone Number	
Enclos	sed is a check for	the following amount:	,		
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is er	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		Registration			
		Division of Clifton Buil	Corporations ding		

Tallahassee, FL 32301

Tallahassee, FL 32314

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 AUG 26 AM 1 99

4225	LAND HOLDINGS LL	C		
(Name of the Limited Li (A Fl	ability Company as it now appear orida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liab	ility Company were filed on	08/12/2011	and assigned	
Florida document numberL1100009267	77			
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	e limited liability company he	<u>:e</u> :		
4425	LAND HOLDINGS LLC			
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Compa	nny," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if applicabl	·			
- · ·				
Principal office address MUST BE A STREET A	<u> </u>			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BO	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on e	our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:			··-	
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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	nager ` Aanaging 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 amend	ding any other information, ente	er change(s) here: (Attach additional sheets, if necessary.,	SECRETARY OF STATE OIVISION OF CORPORATION OF CORPO
Dated	AUGUST 12	2011	SNO.
		nmm	
	#ignature of a	n member or authorized representative of a member KAREN WILLIAMS	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00