L11000104357

(Requestor's Name)					
(Address)					
(Address)					
· ·					
(City/State/Zip/Phone #)					
(Organisalis)					
☐ PICK-UP ☐ WAIT ☐ MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
O Company					
Special Instructions to Filing Officer:					
L. SELLERS					
OCT -6 2011					
EXAMINER					

Office Use Only



100212935671

100212935671 10/05/11--01023--001 **25.00

FILED
11 OCT -5 PH 4:38
SECRETARY OF STATE

Law Offices of

LAWRENCE S. KLITZMAN, P.A.

1391 SAWGRASS CORPORATE PARKWAY SUNRISE, FLORIDA 33323

LAWRENCE S. KLITZMAN LLM. TAXATION ALSO ADMITTED IN NEW JERSEY TELEPHONE 954-384-4421 FACSIMILE 954-389-3579 E-MAIL LSK@KLITZLAW.COM

September 30, 2011

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Articles of Amendment for Ramaco, LLC

Gentleperson:

Enclosed please find the Articles of Amendment for the Articles of Organization of Ramaco, LLC. The assigned document number for the Articles of Organization is L11000104357.

Also enclosed is a check in the amount of \$25.00 for the Articles of Amendment filing fee.

Thank you.

Very truly yours,

Lawkence S. Klitznean

LSK:lf

w/enclosure

w/check

COVER LETTER

TO: Registration S Division of Co						
SUBJECT:	Ra	maco, LLC				
	Name of Lin	ited Liability Company	· · · · · · · · · · · · · · · · · · ·			
	f Amendment and fee(s) are su ondence concerning this matte	•				
		Lawrence S. Klitzman	<u> </u>			
		Name of Person				
	Law Office	s of Lawrence S. Klitzman,	P.A.			
		Firm/Company 1391 Sawgrass Corporate Parkway				
	1391 S					
		Address				
Sunrise, Florida 33323						
City/State and Zip Code						
	E-mail address:	Isk@klitzlaw.com E-mail address: (to be used for future annual report notification)				
For further information of	concerning this matter, please	•				
Louera	ence S. Klitzman	054	204 4424			
	of Person	at (954) Area Code & Daytim	384-4421 e Telephone Number			
Enclosed is a check for t	he following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Section 1 Section 2 Sectio			
	ING ADDRESS:	STREET/COURI				

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ramad	co, LLC			
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records.)		
(,			
The Articles of Organization for this Limited Liability Compan	y were filed on	9/13/2011	and assigned	
Florida document number L11000104357				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
The new name must be distinguishable and end with the words "Lin	nited Liability Company	," the designation "Ll	LC" or the abbreviation	
"L.L.C."				
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	ffice address on our	r records, <u>enter th</u>	e name of the new	
registered agent and/or the new registered office address ne	<u>re</u> :		· · ·	
Nome of New Devistand Asset			SE 1	
Name of New Registered Agent:			FA C 1	-
New Registered Office Address:				the Sagrage of
	Enter	Florida street addre		
		, Florida		
	City		A Cotto	
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</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

<u>Title</u> <u>Name</u> Address Type of Action Paraco of the Trensure Coost, LLC 2100 SE Ocean Boulevard, Suite 100 MGR □ Add Stuart, Florida 34996 ✓ Remove Ramaco Management, UC 2100 SE Ocean Boulevard, Suite 100 MGR a loupuing limited liability company Stuart, Florida 34996 ☐ Remove ☐ Add Remove □ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 30 Dated_ Signature of a member or authorized representative of a member Lawrence S. Klitzman Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00