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SALASSEE, FLORID.

D. BRUCE

SEP 27 2011

EXAMINER

COVER LETTER

Division of Co					
SUBJECT:	Harbco Develo	pment & Realtrack Ll	_C		
	Name of Lin	nited Liability Company		,	
The enclosed Articles of	of Amendment and fee(s) are so	ubmitted for filing.			
Please return all corresp	pondence concerning this matte	er to the following:			
		Gary J Guastella			
		Name of Person		_	
	Ha	arbco Development LLC		_	
		Firm/Company			
	3700 34th Street, Suite 300				
		Address		-	
		Orlando, FL 32805		Ã: -	
		City/State and Zip Code		I SEP	raus G to
		garyg@harbco.com		P 26 HASS	
		(to be used for future annual report r	iotification)	SSET SSET SSET SSET SSET SSET SSET SSET	ا ۳۳
For further information	concerning this matter, please	call:		는 다. S. 그는 그는 그는 그는 그는 그는 그는 그는 그는 그를 보고 있다.	
	A. Tom Harb	at (_407)	383-9600	물길 :28	-
Name	of Person	Area Code & Day	ytime Telephone Numbe	a. ≥.	
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 enclo	osed) Certifie	ate of Status &	ed)
Regis	LING ADDRESS: tration Section	STREET/COU Registration Se	JRIER ADDRESS: ction		
	ion of Corporations Box 6327	Division of Cor Clifton Buildin			
Tallahassee, FL 32314		2661 Executive			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Harbco Developme	ent & Realtr	rack LLC	
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now ap Liability Compar	opears on our records.) ny)	
The Articles of Organization for this Limited Liability Compar	ny were filed on ₋	September 14, 2011 and assigne	d
Florida document numberL11000105855			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company	<u>here</u> :	,
HD & F			
The new name must be distinguishable and end with the words "Lin" "L.L.C."	nited Liability Co	ompany," the designation "LLC" or the abbre	viatior
Enter new principal offices address, if applicable:			`8 € ` —— <u>———</u>
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	
		SE	<u> </u>
Enter new mailing address, if applicable:		26 P ASSEE	}
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
		유진 2	
	<u> </u>	DE A	_
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		on our records, enter the name of the	e new
egistered agent and/or the new registered office address ne	<u>:re</u> :		
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, 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>	<u>Address</u>	Type of Action
			AddRemove
			— <u> </u>
			——————————————————————————————————————
D. If amen	ding any other information,	enter change(s) here: (Attach additional shee	ts, if necessary.)
- -			11 SEP 26 PM
Dated	September 21	2011 HAV	F STATE FLORIDA
	Signapar	A. Tom Harb Typed or printed name of signee	mber

Page 2 of 2

Filing Fee: \$25.00