

L11DDDD1060916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

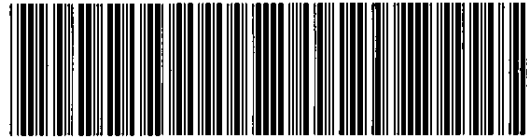
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/23/11--01044--019 **25.00

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11 SEP 23 AM 4:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 26 2011

EXAMINER



2090 Palm Beach Lakes Boulevard, Suite 701, West Palm Beach, Florida 33409 USA

Office (561) 684-2095 Fax (561) 684-2052

www.martmanagement.com

September 20, 2011

State of Florida
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Amendment to Articles of Organization – Sulphur Springs General LLC

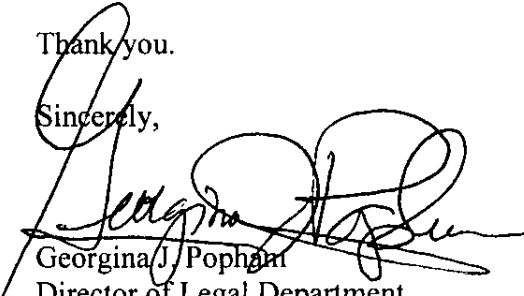
Dear Sir/Madam:

Enclosed please find Articles of Amendment to Articles of Organization of Sulphur Springs General LLC to change the name of the LLC to "Sulphur Springs General LLC". I am also enclosing our check payable to the "Florida Department of State" in the amount of \$25.00, representing the required filing fee.

Please contact me with any questions or comments regarding the this amendment.

Thank you.

Sincerely,


Georgina J. Popham
Director of Legal Department

GJP/gp
Encl.

Sulphur Springs Gen LLC: Letter to FL SOS Re Amend to Art 9-20-11 (GJP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Sulphur Springs General LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 9/2/11 and assigned
Florida document number L11000106916.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Sulphur Springs General LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 = Manager

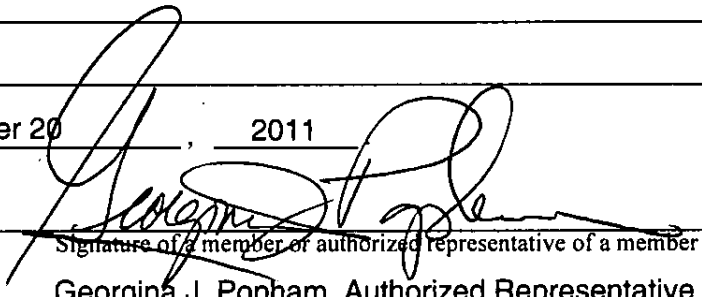
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated September 20, 2011



Signature of a member or authorized representative of a member

Georgina J. Popham, Authorized Representative

Typed or printed name of signee