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D. BRUCE
JUL 12 2012
EXAMINER

## **COVER LETTER**

TO: Registration S Division of Co					
		er Holdings, LLC ited Liability Company	····		
	f Amendment and fee(s) are sul- condence concerning this matter	-			
		Wadson Sainvil			
Brov		wndeer Properties, Inc.	<del></del>		
		2827 SW 4th Street		<b>12</b> SE TAL	
Address Ft. Lauderdale, FL 33312		Lauderdale, FL 33312		12 JUL I SECRETAF ALLAHAS	_H
City/State and Zip Code  admin@browndeerproperties.com  E-mail address: (to be used for future annual report notification)			on)	L II AMIO: 37 TTARY OF STATE HASSEELFLORID	ILEO
For further information	concerning this matter, please of		,	IAIE ORIDA	
	adson Sainvil of Person	at ( 954 ) 44  Area Code & Daytime Te	8-4099 lephone Number	-	
Enclosed is a check for t	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee Certificate of St Certified Copy (additional copy	atus &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Browndeer Ho	ldings, LLC					
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears ability Company)	on our records.)				
The Articles of Organization for this Limited Liability Company value of C	were filed on	09/20/2011	and assigned			
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabi	lity company here	<b>:</b>				
Castlewood Apar	tments, LLC					
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Compan	y," the designation "I	LC" or the abbreviation			
Enter new principal offices address, if applicable:			AS Z			
(Principal office address MUST BE A STREET ADDRESS)			CRE LAH			
Enter new mailing address, if applicable:			FILED LUI AMI TARY OF S			
(Mailing address MAY BE A POST OFFICE BOX)		.=				
			<u> </u>			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ur records, <u>enter t</u>	the 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title <u>Name</u> **Address Type of Action** ☐ Add Remove ☐ Add Remove ☐ Add Remove Add Remove  $\square$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 09 2011 Dated\_ Signature of a member or authorized representative of a member Wadson Sainvil, Manager Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00