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SECRETARY OF STATE

J. BRYAN

JUL -5 2012

EXAMINER

COVER LETTER

TO:

Registration Section

Division of	Corporations			
CHDIECT.	Canusa Proper	ty Management #1, LLC		
SUBJECT:		nited Liability Company		
The enclosed Article	es of Amendment and fee(s) are su	ubmitted for filing.		
Please return all corr	espondence concerning this matte	er to the following:		
	Timothy J. Bruehl Name of Person			
		Audit of Follows	ECR	
	Waggoner & Bruehl, P.A.			
		Firm/Company	TARY OF SHASSEE, FL	
	540	5400 Pine Island Rd., Suite D		
		Address	2012 JUL -2 PM 3: 5	
	•	Bokeelia, FL 33922	Şm ö n	
	<u>-</u>	City/State and Zip Code		
	*			
For further informati	ion concerning this matter, please	(to be used for future annual report notifica call:	ation)	
	Deborah Stiger	at (239) 2	83-1076	
Na	me of Person	Area Code & Daytime	Celephone Number	
Enclosed is a check	for 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 Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6:27		STREET/COURIE Registration Section Division of Corporat Clifton Building	ions	
Tallahassee. FL 32314		2661 Executive Cent	er Circle	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Canusa Property Management #1, 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 Li	ability Company were filed on _	November 17, 2011	_ and assigned	
Florida document numberL11000131	159			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liability company	here:		
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Con	mpany," the designation "LLo	C" or the abbreviation	
Enter new principal offices address, if applica	able:			
(Principal office address MUST BE A STREE	T ADDRESS)			
•				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE I	<u></u>			
B. If amending the registered agent and/or the new registered of		n our records, enter 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 = N	lanaging Mo	ember		
<u> Title</u>	<u>Name</u>	· !	Address	Type of Action
MGRM	Paul M	. McLaughlin	217 NW 26th Place Cape Coral, Florida 33993	Add Remove
MGR	Paul M	. McLaughlin	217 NW 26th Place	— ✓ Add
		;	Cape Coral, Florida 33993	Remove
				Add Remove
<u>. </u>		ļ		Add Remove
	<u> </u>	:		Remove
				Add Remove
D. If amend	ding any oth	er information, enter c	hange(s) here: (Attach additional sheets, if necessary.)	
		,	•	
_			A	SECRETA SECRETA
	، سر ا	2ath	2012	RYY -2
Dated	LINE			ED PH 3: 56
		/	Timothy J. Bruehl yped or printed name of signee	
		1	yped of printed hame of signed	

Page 2 of 2

Filing Fee: \$25.00