L11000/43126

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T. HAMPTON

COVER LETTER

то:	Registration S Division of Co					
SUBJECT: 5120 L			as Palmas LLC			
	<u></u>		ited Liability Company			
		f Amendment and fee(s) are su				
riease	return an corresp	condence concerning this matte	r to the following:			
			Villiam J. Wedge, Esq.			
Wedge Assoicate				· 		
Firm/Company						
12230 Forest Blvd. Suite 200						
			Address			
			Wellington, FL 33414 City/State and Zip Code			
	bill@wedgeassociates.com					
		E-mail address: (to be used for future annual report	notification)		
For furt	ther information	concerning this matter, please of	call:			
		liam J. Wedge	at (_561)	227-1555		
	Name	of Person	Area Code & Da	aytime Telephone Number		
Enclose	ed is a check for t	the following amount:				
	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
٠,	Regist Divisi P.O. B	LING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	Registration S Division of Co Clifton Buildir	orporations ng e Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



12 FEB -6 PH 1: 45

5120 Las Pa					
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liability Company)	y as it now appea ability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company v	vere filed on	12/22/2011	and assigned		
Florida document numberL11000143126					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	ity company her	<u>e</u> :			
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Compa	nny," the designation "LL	C" or the abbreviation		
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 registered agent and/or the new registered office address here:	ce address on o	our records, <u>enter the</u>	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 the provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as probe being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	te performance (ovided for in Ch	of my duties, and I am apter 608, F.S. Or, if	familiar with and this document is		

Page 1 of 2

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 Name

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kimberly Van Kampen Bay	ER 10005 D. HELL B. I	
141011	Klimberry Vari Kamperr Ba	13285 Southfields Road Wellington, FL 33414	Add Remove
			Add Remove
			Add Remove
			Remove
			Add
			Remove
			□
			Add Remove
			
			Ndd Remove
D. LC			
D. If amend	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary.)
			
			— <u> </u>
			ECRE ISION FEB
			<u> </u>
Dated	February 1	2012	LED RYCHE STATE CORPORATIONS PH 1:45
	Le	News and a first f	
		ther or authorized representative of a member villiam J. Wedge, Esq.	
	Ту	ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00