

L12000046660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

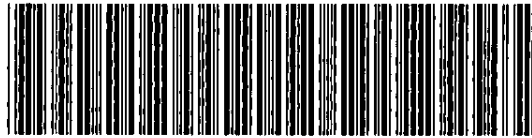
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MAY 10 2012

EXAMINER



100231459301

05/11/12--01001--009 **25.00

RECEIVED

2012 MAY 10 PM 4:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 MAY 10 PM 4:06

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS



MATHEWS LAW FIRM, P.A.

www.mathewslawfirm.com

Attorneys:

Matt Mathews, Attorney at Law*
Henry Lee Miller, Jr., Attorney at L
John C. Davis, Attorney at Law**
Of Counsel

* Civil Law (International) Notary
** Licensed to practice in FL & GA

277 Pinewood Drive
Pinewood Professional Offices
Tallahassee, Florida 32303-8510
(850) 681-9303 Phone
(850) 681-2998 Fax

May 10, 2012

- Real Estate
- Title & Closing Services
- Business Law
- Corporate Law
- Estate Planning
- Probate
- Collections
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- Foreclosure
- Litigation

Via Hand Delivery

Registration Section
ATTN: Buck Kohr
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Windermere Showcase, LLC – Document No. L12000046660
Articles of Amendment

Dear Registrar:

Enclosed are the Cover Letter and Articles of Amendment for filing regarding the above-referenced entity. Also enclosed is check number 109 for \$25.00, from Windermere Showcase, LLC, for the filing fee for the Articles of Amendment.

Please call us if you have any questions.

Sincerely,

Matt Mathews
Attorney at Law

MM/cbb
Enclosures

12 MAY 10 PM 4:06
TALLAHASSEE, FL
DIVISION OF CORPORATIONS
REGISTRATION SECTION

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Windermere Showcase, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matt Mathews, Attorney at Law

Name of Person

Mathews Law Firm, P. A.

Firm/Company

277 Pinewood Drive

Address

Tallahassee, FL 32303

City/State and Zip Code

m2@mathewslawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matt Mathews, Attorney at Law

Name of Person

at (850) 681-9303, Ext. 1

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

FILED
DIVISION OF CORPORATIONS
12 MAY 10 PM 4:06

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

Windermere Showcase, LLC

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

FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
12 MAY 10 PM 4:06

The Articles of Organization for this Limited Liability Company were filed on April 4, 2012 and assigned
Florida document number L12000046660.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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

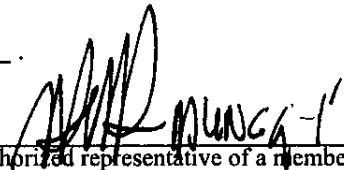
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Frank A. Baloun	8934 Conroy Windermere Rd Orlando, FL 32835	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	Frank A. Baloun	8934 Conroy Windermere Rd Orlando, FL 32835	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

12 MAY 10 PM 4: 07

FILED
RECORDS SECTION
OFFICE OF CONSUMER PROTECTION

Dated May 8, 2012



Signature of a member or authorized representative of a member
James J. Roth, Jr., Manager

Typed or printed name of signee