## L12000048536

| (Re                                     | equestor's Name)   |             |  |  |
|---|--------------------|-------------|--|--|
| (Ac                                     | ldress)            |             |  |  |
| (Ac                                     | ldress)            |             |  |  |
| (Ci                                     | ty/State/Zip/Phone | e #)        |  |  |
| PICK-UP                                 | MAIT               | MAIL        |  |  |
| (Business Entity Name)                  |                    |             |  |  |
| (Document Number)                       |                    |             |  |  |
| Certified Copies                        | _ Certificates     | s of Status |  |  |
| Special Instructions to Filing Officer: |                    |             |  |  |
|   |                    |             |  |  |
|   |                    |             |  |  |
|   |                    |             |  |  |

Office Use Only



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J. BRYAN

MAY 22 2012

EXAMINER

## **COVER LETTER**

|                       | on Section<br>f Corporations                  |  |  |
|-----------------------|---|--|--|
| subject: Pro          | gressive Propert                              | y Derelopers U.C.  |  |
| The enclosed Articl   | es of Amendment and fee(s) are su             | bmitted for filing.  |  |
| Please return all cor | respondence concerning this matte             | r to the following:  |  |
|                       | Bouvar  | - A. Peralta Name of Person  |  |
|                       | Progressi                                     | ive Property Devek   | persuc   |
|                       | 880 Land                                      | <u>Per Circle</u> Address  | TAELAHAY 21  |
|                       | <u> </u>                                      | 2e, FC 3476/   |  |
|                       | Bolivara p                                    | City/State and Zip Code  era Ita Qamail Com  (to be used for future annual report notifica | PH 1: 34   |
| For further informat  | tion concerning this matter, please           | call:  |  |
| Boliva                | A Peralta                                     | at ( <u>407) 285 025</u><br>Area Code & Daytime 1  | Selephone Number   |
| Enclosed is a check   | for the following amount:                     |  |  |
| \$25.00 Filing Fe     | ce \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)                          | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| M                     | IAILING ADDRESS:                              | STREET/COURIE  | R ADDRESS:   |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| <u> </u>   | perty Levelopers LL  |                                       |  |
|--|--|---------------------------------------|--|
| (Name of the Limited LA  | ability Company as it now appears on our lorida Limited Liability Company) | records.)                             |  |
| The Articles of Organization for this Limited Liab Florida document number 42 0000485        |  | ol2 and assigned                      |  |
| This amendment is submitted to amend the follow  | ing:   | MICHAY 21 PH                          |  |
| A. If amending name, enter the new name of the   | ne limited liability company here:   | SEE PA                                |  |
| The new name must be distinguishable and end with t "L.L.C."                                 | he words "Limited Liability Company," the o                                | designation "LLC" of the ablue iation |  |
| Enter new principal offices address, if applicab   | le:  | ·                                     |  |
| (Principal office address MUST BE A STREET)  | ADDRESS)   |                                       |  |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO           | <u></u>  |                                       |  |
| B. If amending the registered agent and/or registered agent and/or the new registered office |  | rds, <u>enter the name of the new</u> |  |
| Name of New Registered Agent:  |  |                                       |  |
| New Registered Office Address:   | Enter Flori  | da street address                     |  |
|  |  |                                       |  |
|  | City   | , Florida<br>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 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 Address Type of Action** <u>Name</u> Bolivar A. PeraHa. MGRM 880 Lancer Circle ☐ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Everything will be the same except we are adding Bolivar Peratta as a managing Signature of a member or authorized representative of a member

Page 2 of 2

A. Peralta
Typed or printed name of signee

Filing Fee: \$25.00