L12000069083

(Re	questor's Name)	
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SECRETARY OF STATE

J. BRYAN

DEC -4 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

Lake Nona Homes LLC

SUBJECT

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:

Frank Prince

Name of Person

Firm/Company

125 River Road Circle

Addres

Rockledge, FL 32955

City/State and Zip Code

frp1414@gmail.com

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

For further information concerning this matter, please call:

Frank Prince

321,243-6620

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$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)

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

Lake Nona Homes LLC	
(<u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Cor Florida document number L12000069083	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
Lake Nona Properties LLC	
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	ESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	F. F. ORDE
B. If amending the registered agent and/or registered agent and/or the new registered office addre	red office address on our records, enter the name of the new ess 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	inager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
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			Remove
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			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
_{ated} November 29	2012			
Cignati	ure of a member or authorized representative of a member			
Frank R Prince	are of a member of authorized representative of a member			
	Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00

