

Oct 2 2012 09:08am

P003/005

L12000238842 781

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H12000238842 3)))



H120002388423ABC/

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES
Account Number : I19980000007
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LSK COMMERCIAL PROPERTY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

B. KOHR

OCT 3 2012

EXAMINER

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Corporate Filing Menu

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P002/005



October 2, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LSK COMMERCIAL PROPERTY, LLC
425 SUMMIT RIDGE PLACE
#101
LONGWOOD, FL 32779US

SUBJECT: LSK COMMERCIAL PROPERTY, LLC
REF: L12000092781

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

We assume that you intend to ADD Sheryl P. Kurland as a MANAGER, but neither of the boxes is checked. Please check the ADD box if she is to be added.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Buck Kohr
Regulatory Specialist II

FAX Aud. #: H12000238842
Letter Number: 712A00024383

RECEIVED

12 OCT -2 AM 8:03

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LSK Commercial Property, 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 Liability Company were filed on July 17, 2012 and assigned
Florida document number L'12000092781

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 "L.L.C."

Enter new principal offices address, if applicable:

302 Smokerise Blvd.

(Principal office address MUST BE A STREET ADDRESS)

Longwood, FL 32779

Enter new mailing address, if applicable:

302 Smokerise Blvd.

(Mailing address MAY BE A POST OFFICE BOX)

Longwood, FL 32779

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:

Sheryl P. Kurland

New Registered Office Address:

302 Smokerise Blvd.

Enter Florida street address

Longwood

Florida

32779

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.

Sheryl P. Kurland
(Changing Registered Agent, Signature of New Registered Agent)

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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

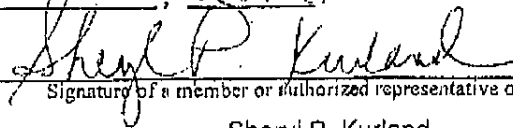
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Sheryl P. Kurland	302 Smokerise Blvd. Longwood, FL 32779	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Bette A. Leider	425 Summit Ridge Place #101 Longwood, FL 32779	<input type="checkbox"/> Add <input checked="" 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.)

Dated

9/26, 2012



Signature of a member or authorized representative of a member

Sheryl P. Kurland

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00