12000102581

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
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T. CLINE

SEP 2 7 2012

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:		Residence Center, LLC ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
		Wolmar Busche Name of Person		
	ı	_XI Components, Inc.		
Firm/Company				
2802 Leslie Road				
		Address Tampa, FL 33619	á	F. 2
City/State and Zip Code				
	j7 E-mail address: (emerson@yahoo.com to be used for future annual report notifica	ition)	T 26
For further information	concerning this matter, please o	call:	in the second se	if in the state of the state o
	olmar Busche		63-9682	
Name o	of Person	Area Code & Daytime	elephone Number	· · · · · · · · · · · · · · · · · · ·
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy	itus &

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

Tranquil Care	e & Residence Cente	er, LLC	_		
(<u>Name of the Limited Liabi</u> (A Florid	l <mark>ity Company as it now appea</mark> la Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability	Company were filed on	8/9/12	and assign	ned	
Florida document number L12000102581	·				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the li	mited liability company her	<u>·e</u> :			
Tranquil Res	idence & Care Center, L	LC			
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Compa	any," the designation	"LLC" or the abb	reviation	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADI	DRESS)				
			28	energy by	
Enter new mailing address, if applicable:			第4 2	State Sandaran	
(Mailing address MAY BE A POST OFFICE BOX)			原文 の	\$	
	****			\$ E &	
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B. If amending the registered agent and/or reg registered agent and/or the new registered office ac	istered office address on o ldress here:	our records, <u>enter</u>	the name of	the new	
Name of New Registered Agent:					
New Registered Office Address:					
	En	ter Florida street a	ddress		
<u></u>		, 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 Title <u>Name</u> <u>Address</u> **Type of Action** ☐ Add ☐ Remove ☐ Add Remove ☐ Add Remove ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 21 2012 Dated Signature of a member or authorized representative of a member Wolmar Busche Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00