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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Over look II 3 III Investments 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:
Divi Caylov Name of Pyrson
Overlook II & III Investments
6000C Sawarass Village Cir
Porte Vedra Beh FL 32082 City/State and Zip Chide
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Denise Stock (admin) at (904), 719-2040  Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee.  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited I.	iability Company Torida Limited Lia	y as it now ability Con	nuesto appears on our appears)	records.)		_	
The Articles of Organization for this Limited Liabil Florida document number <u>L. 12600131</u>	lity Company w <u>1,2 6</u> ,	vere filed	on <u>10</u> -	15-201:	2 and	assigned	i
This amendment is submitted to amend the following	ng:						
A. If amending name, enter the new name of the	e limited liabili	ity comp	any here:				
The new name must be distinguishable and contain the words	"Limited Liability	y Company	y," the designation	n "LLC" or the a	<u>y</u> bbjevjation	<u>23</u> c."	
Enter new principal offices address, if applicable						HAR 2	
(Principal office address MUST BE A STREET A  Enter new mailing address, if applicable:	<u>DDRESS)</u>			·	) OF STAT	8 PH 4: 41	
(Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>				<u> </u>	<del></del>	
B. If amending the registered agent and/or regis agent and/or the new registered office address he		dress on	our records,	enter the nan	ne of the	new reg	istered
Name of New Registered Agent:	Lisa	5	Taylo	<u> </u>			
New Registered Office Address:	6000 A	Sal	wara SS nter-Florida street	V. Mac	je C	ic.	
_	Lisa 6000A Prnte Ve	City	Beach	, Florida	320 Zip Co	82 ede	
Naw Dagietarad Agant's Signatura, if changing Dagi					•		

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member Type of Action Title <u>Name</u> **Address** 6000 C Sawyr ass Village Cil DAdd Unionville Inc \_\_\_\_\_\_Remove Clonnell RenovalinsInc 6000 C Sawgrass Village Cir XAdd Ponde Vedra Beh FL 32052 - Remove \_\_\_\_\_ □Change \_\_\_\_ Change \_\_\_\_\_ □Change \_\_\_\_\_ □Remove

\_\_\_ □Change

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Effective	date, if other than the	date of filing	<b>7:</b>		(on	tional)	
<u>Note:</u> If	e date, if other than the ive date is listed, the date mu the date inserted in this bl t's effective date on the D	lock does not n	neet the applica				
record s d is filed	pecifies a delayed effectiv	re date, but not	an effective tin	ne, at 12:01 a.m. o	on the earlier of:	(b) The 90th day a	fter the
x	4-25	·	2002				
pated				_		-	
Jated		Signature of a m	nember or author	rized representative	of a member	nagins	Men

Filing Fee: \$25.00