## L12000/32226

| (Re                     | equestor's Name)   |           |
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DIVISION OF CORPORATION

ON THE PROPERTY OF STATE OF CORPORATION

ON THE PROPERTY OF THE PROPE

C. LEWIS

OCT 23 2012

EXAMINER

## **COVER LETTER**

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| information con                      |  |  | for future angual repor   | t notification)   |   |
| ALLISC                               | N BUBASH   | ,  | at ( 864 )  | 616-7   | 502   |
| Name of P                            | erson  | `  |   | taytime Telepho   | one Number  |
| a check for the                      | following amount:  |  |   |   |   |
| filing Fee [                         |  | itus C   | Certified Copy  |   | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  |
| Registrati<br>Division o<br>P.O. Box | on Section of Corporations 6327  | e de<br>Selection (Selection   | Registration 9 Division of C Clifton Build  | Section<br>forporations<br>ing  |   |
|                                      | information cond  ALLISC  Name of Po  a check for the (  Filing Fee [  MAILING  Registration  Division of Po  P.O. Box | LAD-VII  Name of the following amount:  The state of the s | LAD-VIII MANAG  Name of Limited Liabi  Id Articles of Amendment and fee(s) are submitted for all correspondence concerning this matter to the formal correspondence concerning this matter to the formal concerning this matter to the formal concerning this matter.  EASLE  City/St  BUBALLY8  E-mail address: (to be used information concerning this matter, please call:  ALLISON BUBASH  Name of Person  a check for the following amount:  Citing Fee \$\square\$30.00 Filing Fee & \$\square\$55.  Certificate of Status  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327 | LAD-VIII MANAGEMENT LLC  Name of Limited Liability Company  and Articles of Amendment and fee(s) are submitted for filing.  In all correspondence concerning this matter to the following:  ALLISON BUBASH  Name of Person  LAD-VIII MANAGEMENT LI  Firm/Company  553 BRIGHTON CIRCLE  Address  EASLEY, SC 29642  City/State and Zip Code  BUBALLY864@GMAIL.CO  E-mail address: (to be used for future annual report information concerning this matter, please call:  ALLISON BUBASH  Name of Person  ALLISON BUBASH  Name of Person  Area Code & D  Control of Copy  (additional copy is encoded)  All LING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Clifton Build | LAD-VIII MANAGEMENT LLC  Name of Limited Liability Company  In all correspondence concerning this matter to the following:  ALLISON BUBASH  Name of Person  LAD-VIII MANAGEMENT LLC  Firm/Company  553 BRIGHTON CIRCLE  Address  EASLEY, SC 29642  City/State and Zip Code  BUBALLY864@GMAIL.COM  E-mail address: (to be used for future angusal report notification)  information concerning this matter, please call:  ALLISON BUBASH  Name of Person  a check for the following amount:  filing Fee Scient Status  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6337  Registration Section  Division of Corporations  P.O. Box 6337  Cliffton Building  Cliffton Building |

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2012 OCT 22 PM 1: 08

|  | II MANAGMENT LL   |   |                         |
|--|---|---|-------------------------|
| ( <u>Name of the Limited Liabil</u><br>(A Florid   | ity Company as it now apper<br>a Limited Liability Company) | ars on our records.)                    |                         |
| The Articles of Organization for this Limited Liability  | Company were filed on                                       | OCTOBER 17                              | and assigned            |
| Florida document number L12000132226   | ·   |   |                         |
| This amendment is submitted to amend the following:  |   |   |                         |
| A. If amending name, enter the new name of the li  | mited liability company he                                  | ere:                                    |                         |
| LAD-VII  | I MANAGEMENT LLC  |   |                         |
| The new name must be distinguishable and end with the v "L.L.C."                                       | vords "Limited Liability Com                                | pany," the designation "Ll              | LC" or the abbreviation |
| Enter new principal offices address, if applicable:  |   |   |                         |
| (Principal office address MUST BE A STREET ADD   | DRESS)  |   |                         |
|  |   |   | ·                       |
|  |   |   |                         |
| Enter new mailing address, if applicable:  |   |   | <del></del>             |
| (Mailing address MAY BE A POST OFFICE BOX)   | 4-20 Garage   |   |                         |
|  |   | - · · · · · · · · · · · · · · · · · · · |                         |
| B. If amending the registered agent and/or reg<br>registered agent and/or the new registered office ac |   | our records, enter th                   | e name of the new       |
| Name - CNico Davidson d America  |   |   |                         |
| Name of New Registered Agent:  |   |   |                         |
| New Registered Office Address:   |   | Enter Florida street addr               |                         |
|  | Ľ   | mer r toriaa sireet aaar                | ess                     |
|  | Cin   | , Florida                               | Zip Code                |
|  | City  |   | zip Coae                |

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

|               | <u>Name</u>                             | <u>Address</u>  | Type of Action   |
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