

L12000142255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

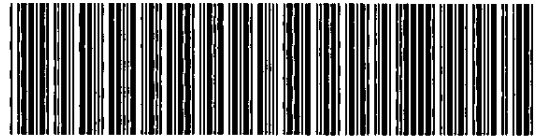
Special Instructions to Filing Officer:

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NOV 27 2012

EXAMINER



100241957281

11/26/12--01012--012 **25.00

FILED
12 NOV 26 PM 4: 20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Castleton Office Center LLC
C/O 11555 Heron Bay Blvd
Suite 200
Coral Springs, FL 33076
202 289 6955

November 20, 2012

Via US Mail
Florida Department of State
Division of Corporations,
P.O. Box 6327
Tallahassee, FL 32314

Re: Articles of Amendment to Articles of Organization
Florida Document Number: L1200142255

To Whom It May Concern:

On behalf of Castleton Office Center LLC, I hereby request Amendment of the Articles of Organization of Castleton Office Center LLC. The original Articles of Organization, filed November 9, 2012 requested the name "Castleton Office Center, LLC". The amended name shall be "Castleton Office Center LLC" without the comma (";") before the LLC designation. The amendment shall be effective when filed with the Florida Department of State.

Enclosed, please find the signed amendment form and a check for the Filing Fee in the amount of \$25.



Sincerely,
Gregory Wallach
Authorized Representative
202 289 6955

COVER LETTER

**TO: Registration Section
Division of Corporations**

Castleton Office Center 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:

Gregory Wallach

Name of Person

Firm/Company

11555 Heron Bay Blvd, Ste 200

Address

Coral Springs, FL 33076

City/State and Zip Code

aklein@kleinlawpllc.com

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

For further information concerning this matter, please call:

Gregory Wallach

202 289-6955

at ()

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**

Castleton Office Center, 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 November 9, 2012 and assigned Florida document number L12000142255.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Castleton Office Center LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

RECEIVED
12 NOV 26 PM 4:20
CLERK OF STATE
TALLAHASSEE, FLORIDA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

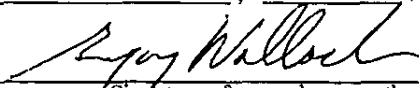
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated November 19, 2012



Signature of a member or authorized representative of a member

Gregory Wallach

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

EFFECTIVE UPON FILING.

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L12000142255
FILED 8:00 AM
November 09, 2012
Sec. Of State
clewis

Article I

The name of the Limited Liability Company is:
CASTLETON OFFICE CENTER, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
2 NORTH MAIN STREET
CASTLETON ON HUDSON, NY. US 12033

The mailing address of the Limited Liability Company is:
11555 HERON BAY BLVD
SUITE 200
CORAL SPRINGS, FL. US 33076

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
ANDREW M KLEIN
11555 HERON BAY BLVD
SUITE 200
CORAL SPRINGS, FL. 33076

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: ANDREW M. KLEIN

Article V

The name and address of managing members/managers are:

Title: MGRM
ANDREW M KLEIN
11555 HERON BAY BLVD, SUITE 200
CORAL SPRINGS, FL. 33076 US

L12000142255
FILED 8:00 AM
November 09, 2012
Sec. Of State
clewis

Article VI

The effective date for this Limited Liability Company shall be:

11/09/2012

Signature of member or an authorized representative of a member

Electronic Signature: GREGORY WALLACH

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.