L12000152540

(Red	uestor's Name)	
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(City	//State/Zip/Phon	e #)
PłCK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
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Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	
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B. KOHR

DEC 12 2012

EXAMINER



000241895080



DEPARTMENT OF STATE ACCOUNT FILING COVER SHEET

	Account Number	FCA00000017	
-	Date:	12 11 12	720
	Requestor Name:	Carlton Fields	
	Address:	Post Office Drawer 190 Tallahassee, Florida 32302	SSEER
	Telephone:	(850) 513-3619 - direct (850) 224-1585	LORIDE TO
	Contact Name:	Kim Pullen, CP, FRP	
	Corporation Name:	Cagan Crossing Unit Th	s Outparcels ree, LLC.
	Email Address:		,
	Entity Number:	L12000	152540
	Authorization:	Kim Pull	en .
	Certified Copy		Certificate of Status
_	New Filings	Plain Stamped Copy	Annual Report
	Fictitious Name	X Amendments	Registration
(X) Call When Ready	(X)Call if Problem	() After 4:30
(X) Walk in	() Will Wait	(X) Pick Up
	•	•	

CF Internal Use Only					
Client: 23271	Matter: _	81317			
Name: M. Linnan					
(Deas)	_				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF AMENDMENT	
TO	
ARTICLES OF ORGANIZATION	
OF	
Cagan Crossings Outparcels Unit Three, L.L.C. Name of the Limited Liability Company as it som appears on our records. (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on December 8, 2012 and assigned Florida document number L12000152540 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:	
(A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on December 8, 2012	
Florida document number L12000152540	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability commany here:	
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
Malling 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	
79. _~ _3_	
, Florida	
New Resistered Agent's Signature, if changing Resistered Agent:	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to camply 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

Page 1 of 3

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 = Ma MGRM = N	nager fanaging Member		
Title	Name	Address	Type of Action
	N/A		
			\ Add
			Remove
			·
			Add
		•	
			Remove
	<u>.</u>		Add
	•		Remove,
			L Kemove.
		<u></u>	
			Add
		•	Remove
			Remove
	,		
			Add
			Remove

Amend Article 11 to change the initial Members to road as follows:

Jeffrey Cagan Alexandra L. Dess
Bryan Cagan Richard H. Driehaus, as

Josaph Gottesman trustee of the Richard H.

Michael Daniels Driehaus 2003 Revocable Trust

December 11 2012

Light of a matter or extended representative of a content

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