

LR3000012843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

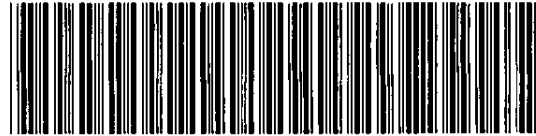
(Business Entity Name)

(Document Number)

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APR 30 2013  
D. BUTLER

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302  
155 Office Plaza Dr Ste A Tallahassee FL 32301  
PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE:** 4/29/13

**NAME:** CITY OF PALMS

*Realty, LLC*

**TYPE OF FILING:** AMENDMENT

**COST:** 30.00

**RETURN:** PLAIN COPY AND CERTIFICATE OF STATUS

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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE

*PDHodge*

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13 APR 29 AM 10:58  
TALLAHASSEE, FL 32302  
FILING & SEARCH SERVICES, INC.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: City of Palms Realty 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:

Malissa Daniels  
Name of Person

Corporate Filing Solutions, LLC  
Firm/Company

425 Boylston St., 3rd Flr  
Address

Boston, MA 02116  
City/State and Zip Code

mdaniels@filingmadeeasy.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Malissa Daniels at ( 617 ) 292-6930  
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

13 APR 29 AM 10:58

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

City of Palms Realty 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 1/25/2013 and assigned

Florida document number 123000012843

This amendment is submitted to amend the following:

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

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)

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>
MGR	Joseph Florentine III	3000 Oasis Road Blvd #1504	<input checked="" type="checkbox"/> Add
		Ft. Myers, FL 33916	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

APR 23 11:10:59

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

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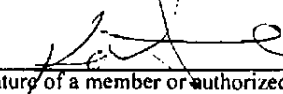
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Dated April 25, 2013

  
Signature of a member or authorized representative of a member

Kathryn Florence  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 APR 29 AM 10:59