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FEB 1 9 2013 J. BRYAN

COVER LETTER

TO:

Registration Section
Division of Corporations

PSC PROPERTIES THREE, 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:

KRISTINE MEYERS

Name of Person

THE DORCEY LAW FIRM, PLC

Firm/Company

10181 SIX MILE CYPRESS PKWY.; STE. C

Address

FORT MYERS, FLORIDA 33966

City/State and Zip Code

KRISTINE@DORCEYLAW.COM

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

For further information concerning this matter, please call:

KRISTINE MEYERS

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

PSC PROPERTIES THREE, 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 Liabili	ty Company were filed on FEBRI	JARY 11, 2013 and assigned	
Florida document number L13000021863			
This amendment is submitted to amend the followin	g:		
A. If amending name, enter the new name of the	ndment is submitted to amend the following: ending name, enter the new name of the limited liability company here: ame must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation we principal offices address, if applicable: I office address MUST BE A STREET ADDRESS) we mailing address, if applicable: address MAY BE A POST OFFICE BOX) nending the registered agent and/or registered office address on our records, enter the name of the new designation "LLC" or the abbreviation "LLC" or the abbreviation "LLC" or the abbreviation we principal office address MUST BE A STREET ADDRESS) The property of the designation "LLC" or the abbreviation "LLC" or the abbreviation we principal office address MUST BE A STREET ADDRESS) The property of the designation "LLC" or the abbreviation "LLC" or the abbreviation "LLC" or the abbreviation we principal office address MUST BE A STREET ADDRESS) The property of the designation "LLC" or the abbreviation we principal office address MUST BE A STREET ADDRESS) The property of the designation "LLC" or the abbreviation "LLC" or the		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"		
Enter new principal offices address, if applicable			
(Principal office address MUST BE A STREET AI	DDRESS)	3- 12-	
Enter new mailing address, if applicable:		PH :	
(Mailing address MAY BE A POST OFFICE BOX	2		
		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
_			
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	PAUL J. CONDON	1861 ACACIA AVENUE	Add
		LEHIGH ACRES, FL 33972	Remove
MGRM	SARA D. CONDON	1861 ACACUA AVENUE	Add
		LEHIGH ACRES, FL 33972	Remove
MGRM	PSC MANAGEMENT OF SW FLORIDA, LLC	1861 ACACUA AVENUE	Add
		LEHIGH ACRES, FL 33972	Remove
		SEC	Add
		ARE HARY OF	Remove
-		LORDA STATE	Add Remove
			Add
			Remove

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u></u>	
Dated FE	BRUARY 12 , 2013
	Signature of a member or authorized representative of a member
	JOSHUA O. DORCEY
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 FEB 18 PH 1: 08
SECREBAY OF STATE