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NEUKLIARY OF STATE
NEUKLIARY OF FLORIDA

K. SALY EXAMINER

OCT-8 2013

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: OVERLOOK at Grassy Lakes Partners, LLC Name of Limited Embility Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person
Celebration Law, PA.
Firm/Company
1007 Celebration Ave.
607 Celebration Ave. Address
Cycloration, FL 34747 City/State and Zip Code
Left @ Celebration Law.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jeffrey 1000/iti at (407) 566-0001
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$250.00 Filing Fee & \$255.00 Filing Fee & \$260.00 Filing Fee,
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

13 OCT -7 PM 3: 06

ALLAMASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on __3/8/2013 and assigned Florida document number <u>L130000-35741</u>. 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." Celebration, FL 34747 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: Celebration Law, P.A. Name of New Registered Agent: 1007 Celebration Ave. New Registered Office Address: Enter Florida street address Celebration, Florida 34747

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

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 = Manager MGRM = Managing Member Title Address Type of Action Name JEFF TPROLITI Celebration Law, PA. Add 607 Celebration tre Remove Celebration, FL 34747 700 Almond Street MGR BretJones Clermont, Fl 34711 Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets; if necessary.)
	· —
Dated	9.17, 2013.
	HAHAD
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	D 2 62

Page 3 of 3

Filing Fee: \$25.00