

# L13000100789

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

T. Burch NOV 20 2013

*P*



Woods  
Weidenmiller  
Michetti

November 15, 2013

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

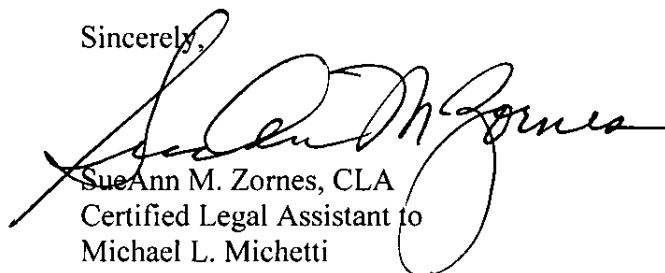
Re: 16153 Caldera Lane, LLC  
16162 Ravina Way, LLC  
EFOC Holdings, LLC  
2340 Stanford Court, LLC  
15548 Marcello Circle, LLC  
Our file no.: 10485-013

To Whom This May Concern:

In connection with the above-referenced matter, enclosed is this firm's operating account check number 5078 in the amount of \$125.00 which represents the filing fees along with the Articles of Amendments.

If you should have any questions or concerns with this matter, please feel free to contact us.

Sincerely,



SueAnn M. Zornes, CLA  
Certified Legal Assistant to  
Michael L. Michetti

SMZ/smr  
enclosure

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: 16153 CALDERA LANE, 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:

**Michael Michetti, Esq.**

Name of Person

**Woods, Weidenmiller & Michetti, PL**

Firm/Company

**5150 Tamiami Trail N, Suite 603**

Address

**Naples, FL 34103**

City/State and Zip Code

**mmichetti@lawfirmnaples.com**

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

For further information concerning this matter, please call:

**Michael**

Name of Person

at ( **239** ) **325-4070**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

16153 CALDERA LANE, 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 07/15/2013 and assigned  
Florida document number L13000100789.

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          | 2340 STANFORD COURT, LLC | 2340 STANFORD COURT | <input type="checkbox"/> Add               |
|              |                          | NAPLES, FL 34112    | <input checked="" type="checkbox"/> Remove |
| MGR          | Agostino, Ashley         | 2340 STANFORD COURT | <input checked="" type="checkbox"/> Add    |
|              |                          | NAPLES, FL 34112    | <input type="checkbox"/> Remove            |
|              |                          |                     | <input type="checkbox"/> Add               |
|              |                          |                     | <input type="checkbox"/> Remove            |
|              |                          |                     | <input type="checkbox"/> Add               |
|              |                          |                     | <input type="checkbox"/> Remove            |
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|              |                          |                     | <input type="checkbox"/> Remove            |

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

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Dated

11/6/13  
*Vincent Agostino*

Signature of a member or authorized representative of a member  
Vincent Agostino - Member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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