113000103005

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D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

_{r.} Mystic Dunes Golf Club, 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:

Eugene J. Garrote

Name of Person

Mystic Dunes Golf Club, LLC

Firm/Company

7850 Shadow Tree Lane

Address

Celebration, FL 34747

City/State and Zip Code

ggarrote@cgmgolfproperties.com

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

For further information concerning this matter, please call:

Eugene J. Garrote

_{at} 321,689-8437

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

Mystic Dunes Golf Club, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on July 22, 2013 and assi Florida document number L13000103005		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	vility company here:	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LI	C" or the abbreviation
Enter new principal offices address, if applicable:	Mystic Dunes Golf Club, LLC	;
(Principal office address MUST BE A STREET ADDRESS)	7850 Shadow Tree Lane	
	Celebration, FL 34747	A A B B B B B B B B B B B B B B B B B B
Enter new mailing address, if applicable:	Mystic Dunes Golf Club, LLC	20 A
(Mailing address MAY BE A POST OFFICE BOX)	7850 Shadow Tree Lane	
	Celebration, FL 34747	<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		e name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	ess
	, 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 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 **Title** <u>Name</u> Address Type of Action Add Remove Remove Remove Remove Remove

D. If am	ending any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)
• ,	·	
•		
Dated S	September 15	2013
		a member or authorized representative of a member
	Eugene J. Garrote	
		Typed or printed name of signee
	$/\mathcal{N}$	Page 3 of 3
	//	Filing Fee: \$25.00

TAIL ANASSEE FLORIDA