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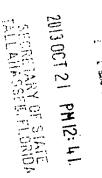
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OCT 22 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Crestwood 203, 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:

Patricio C. Gonzalez

Name of Person

Firm/Company

1842 Wiltshire Village Drive

Address

Wellington, FL 33414

City/State and Zip Code

tunuyan@bellsouth.net

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

For further information concerning this matter, please call:

Patricio C. Gonzalez

_,561\906-3413

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

Crestwood 203, LLC			
(Name of the Limited	Liability Compa Florida Limited I	ny as it now appears on our rec- liability Company)	ords.)
The Articles of Organization for this Limited L Florida document number L13000132085			and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	oility company here:	
N/A			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Company," the desig	gnation "LLC" or the abbreviation
Enter new principal offices address, if applic	able:	N/A	72013
(Principal office address MUST BE A STREE	ET ADDRESS)		<u> </u>
		••••	2 Z Z
Enter new mailing address, if applicable:		N/A	PR F
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/ registered agent and/or the new registered of	ffice address her		, enter the name of the new
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida s	treet address
		· · · · · · · · · · · · · · · · · · ·	orida
		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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Patricio C. Gonzalez	182 Wiltshire Village Drive	Add
		Wellington, FL 33414	Remove
			Add Remove
			Add Remove
			Remove
			Add
			Add

D. If amending any other informa	ation, enter change(s) here: (Attach additional sheets, if necessary.)
Please leave No	orte Realty, Inc. as managing member only.
oated October 10	2013
Sig	gnature of a member or authorized representative of a member
Patricio C. Gon	
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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