

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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13 DEC -9 AM 9:30

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : STANTON AND GASDICK, P.A.

Account Number : 075350000152

Phone : (407) 423-5203

Fax Number : (407) 425-4105

13 DEC -9 AM 8:39

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***  
**Email Address:** MGraff@GraffHoldings.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**SLV, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

C. LEWIS

DEC 10 2013

EXAMINER

From:

12/09/2013 14:24

#231 P.002/005

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **SLV, 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 J. Gasdick**

Name of Person

**Stanton & Gasdick, P.A.**

Firm/Company

**390 N. Orange Avenue, Suite 260**

Address

**Orlando, FL 32801**

City/State and Zip Code

**MGraff@GraffHoldings.com**

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

For further information concerning this matter, please call:

**Michael J. Gasdick**

Name of Person

at **(407) 423-5203 ext 105**

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

APPROVED  
AND  
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From:

12/09/2013 14:24 #231 P.003/005

13 DEC -9 AM 8:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

SLV, 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 December 9, 2013 and assigned  
Florida document number L13000169384.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

SLV13, LLC

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

City, Florida 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

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From:

12/09/2013 14:24

#231 P.004/005

((H13000269594 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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AND  
FILED

From:

12/09/2013 14:24 P.005/005

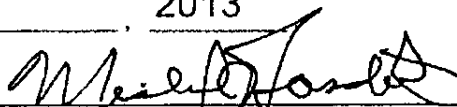
13 DEC -9 AM 8:39

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated December 9, 2013

  
Signature of a member or authorized representative of a member

Michael J. Gasdick

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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