Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GASSMAN, CROTTY & DENICOLO, P.A.

Account Number : 075350000514 Phone : (727)442-1200

Fax Number : (727)443-5829

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*—cr

Email Address:\_

118 DEC -4 AM 9:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 4130 HEADSAIL DRIVE L.L.C.

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**EXAMINER** 

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## **COVER LETTER**

TO: Registration Sec Division of Con	ction porations				
4130 Heads SUBJECT:	ail Drive, L.L.C.				
Sobject.	Name of Lin	uted Liability Company			
The enclosed Articles of a	Amendment and fec(s) are sub	emitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	Alan S. Gassman				
		Name of Person			
	Gassman, Crotty & Denice	oło, P.A.			
		Firm/Company			
	1245 Court Street				
		Address			
	Clearwater, FL 33756				
		City/State and Zip Code			
	E-mail address: (	to be used for future unnual report	notification)		
For further information co	oncerning this matter, please o	all:		2010	
Adriana Choi		727 442-120 at ( )	0	<b>是</b>	
Name of	Person		ytime Telephone Number		 !
Enclosed is a check for the	e following amount:			AM S	
<b>≘</b> \$25,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	c of Status &	

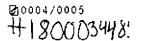
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4130 Headsail Drive, L.L.C.		
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our records.) Is Limited Limbility Company)	
The Articles of Organization for this Limited Liability ( Florida document number L18000252734		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "I.J.C" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add  Name of New Registered Agent:	stered office address on our records, <u>e</u> lress here:	IN DEC -4
New Registered Office Address:	Enter Florida street address	
	, Florid	- 53 <b>.</b> C
N	City	Zip Co
New Registered Agent's Signature, if changing Registere	_ <del></del>	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered ageing filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performance of my duties, and I gent as provided for in Chapter 605, F.S. ed office address, I hereby confirm that th	am familiar with and Or, if this document is
	If Changing Registered Agent, Signature of Ne	w Registered Agent

Page 1 of 3



If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Mcmber

Title	Name	<u>Address</u>	Type of Action
MGR	Kimberly Palys-Chasnoff	1245 Court Street	
		Clearwater, FL 33756	□ Remove
			Change
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		Clearwater, FL 33756	⊟ Remove
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						PITAL PART OF		
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