Division of Corporation

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000295096 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SNYDERSURN, RISHOI & SWANN Account Number : 120070000142

Phone : (407)647-2005 Fax Number : (407)647-1522

**Enter the email address for this business entity to be used for futfixe annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 14 EAST WASHINGTON, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

T. CLINE

DEC 18 2012

EXAMINER

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

P.01

DEC 15 2012 15:13

SUYDERBURN RISHOI SWAN Fax:4076471522

12/17/2012

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H12000295096 3)))

(Name of the Limited Liability Com (A Florida Limite	pany as it now appear d Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Compa Florida document number L9900000806	ny were filed on Fel	oruary 11, 1999	and assi	gned
Florida document number				
This amendment is submitted to amend the following:	,		•	
A. If amending name, enter the new name of the limited li	ability company her	<u>e</u> t		
The new name must be distinguishable and end with the words "Ll.L.C."	imited Liability Compa	ny," the designation "LI	.C" ó£the al	breviation
Enter new principal offices address, if applicable:				2 DE
(Principal office address MUST BE A STREET ADDRESS)			<u></u>	<u> </u>
The second of th		- 	- 22	
		· · · · · · · · · · · · · · · · · · ·	S. S.	3
Enter new mailing address, if applicable:			OR!	8
(Mailing address MAY BE A POST OFFICE BOX)			970	1300
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on o ere:	ur records, <u>enter th</u>	e name of	the new
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	Clty	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Acer	•		zip Coue	
I hereby accept the appointment as registered agent and a the provisions of all statutes relative to the proper and con accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	gree to act in this ca aplete performance to s provided for in Ch	of my duties, and I an apter 608, F.S. Or, it	i familiar v this docun	vith and nent is
IIC	nanging Registered Agen	t, Signature of New Rece	MrsdAront	<u></u>
	1 of 3	(((1)120	VOE230 5) ([[C 0

Dec 15 2012 15:13 P.02

(((H12000295096 3)))

(((H12000295096 3)))
If amending the Managers or Managing Members on our records, enter the title, name, asid bit 26362959963 ber or Managing Member being added or removed from our records;

MGR = Manager MGRM = Managing Member				
Title	<u>Name</u>	Ad		

Title	<u>Name</u>	Address	Type of Action
MGR	GARY THARP	250 S. ORANGE AVENUE, SUITE 125	O Add
		ORLANDO, FLORIDA 32801	Remove
MGRM	FRANK C. DRANE	1878 TURNBERRY TERRACE	
		ORLANDO, FLORIDA 32804	Remove
			·
			2012 DEE 17 A
			OF SIGN
			Remove
			Add
			Remove
			_ Add
			Remove
			_

Page 2 of 3

(((H12000295096 3)))

		(((H12000295096 3)))
D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if ne	cessary.)
į		<u></u>
		
Dated	12/1/2012	,
	Signature of a member or supporized representative of a member	
	Signature of a member or authorized representative of a member	
	Frank C. Drane Typed or printed name of signee	<u></u>

Page 3 of 3 Filing Fee: \$25.00

DIZDEC 17 AM 8 21

(((H12000295096 3)))