Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 Phone : (407)841-1200

: (407)423-1831 Fax Number

**Enter the email address for this business entity to be used for future

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GREENWOOD BOULEVARD, LLC

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Help

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To:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

Name of limited liability Company as it appears on the records of the Florida Department of State: Greenwood Boulevard, LLC			
Enter new principal office address, if applicable:		<u>-</u>	
(Principal office address MUST BE A STREET ADDRESS)		-	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
2. The Florida document number of this limited liability company is: M10000004650		_	
3. Jurisdiction of its organization: 4. Date authorized to do business in Florida: 10/20/2010		-	
SECTION 11 (5-9 complete only the applicable changes) 5. New name of the limited liability company: (must contain "Limited Liability Company," "L.L.C	D.," or "LL	.C.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Floricopy of the written consent of the managers or managing members adopting the alternate name. I must contain "Limited Liability Company," "L.L.C." or "LLC.") 6. If amending the registered agent and/or registered officer address on our records, enter the name	The alternate	e name 202	c
registered agent and/or the new registered office address here:	AHAS AHAS	- Knr	<u> </u>
Name of New Registered Agent: New Registered Office Address: Enter Florida Street Address.	SET.	기 꾶	037
, Florida	SE Zip Tode	9: 44	
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 ag the provisions of all statutes relative to the proper and complete performance of my duties, and I and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S document is being filed to merely reflect a change in the registered office address, I hereby confit liability company has been notified in writing of this change.	am familia . Or, if this	r with	

	ment changes person, title or capacit a member-managed LLC to a manag	y in accordance with 605,0902 (1)(e), indic er-managed LLC	ate that change:
Title/ Capacity	Name	<u>Address</u>	Type of Acti
MGRM	Pamela R. Filutowski	1070 Greenwood Blvd.	□Ad
		Lake Mary, FL 32746	Ren
MGR	Konrad Filutowski	1070 Greenwood Blvd.	= Ad
		Lake Mary, FL 32746	
			DAd
			TRen
·	-11-11		***
aforemention	under the law of which this entity is	ed by the official having custody of record organized. Life Co.	JUN FO AM 9: 45 AHASSEE & LORIDA
	Signato	re of the authorized representative	