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D. BRUCE MAR 14 2017

COVER LETTER

Div	ision of Cor	porations				
SUBJECT:	HARBOUR	ISLE RESALES, LLC				
SUBJECT;		Name of Lin	nited Liability Company	•		
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspon	ndence concerning this matter	to the following:			
		RICHARD D. PERCIC	`			
Name of Person			-			
JECK, HARRIS, RAYNOR & JONES, P.A.						
			Firm/Company		-	
790 JUNO OCEAN WALK, SUITE 600						
			Address		-	
		JUNO BEACH, FL 3340	8-1121			
		DPERCIC@JHRJPA.COM	City/State and Zip Code		2017 HAR SECRETY	
		E-mail address: (to be used for future annual report notific	ation)	APP IN	-
For further in	formation co	ncerning this matter, please c	all:		13 13 13 13	(p) a)
RICHARD I	D. PERCIC		561 713-2094 at ()		The TO	[i
	Name of	Person		Telephone Number	1000 # I	•
Enclosed is a	check for the	e following amount:				
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

MAILING ADDRESS:

TO:

Registration Section

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

HARBOUR ISLE RESALES, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our record a Limited Liability Company)	ds.)
The Articles of Organization for this Limited Liability (Florida document number L0400000760	Company were filed on 1/5/2004	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	- 5, 2
Enter new mailing address, if applicable:		ASS SS
(Mailing address MAY BE A POST OFFICE BOX)		May 70
		0-1 F
		êm I
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our record	s, enter the name of the ne
source agent and/or the new registered office add	icss nere.	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	SS
	, , , , , , , , , , , , , , , , , , ,	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 605, 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

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 Member

Title	Name	Address	Type of Action
AMBR	R. MASON SIMPSON	9315 DOLE CIRCLE	
		WINDERMERE, FL 34786	□ Remove
			☐ Change
			
			☐ Remove
			Change
		***	D Add
			CI Remove
			Change Change Remove
			Remove
***************************************			D Remove
			□ Change
			O Remove
			D Change

If amending any other information, enter change(s) he	ere: (Attach additional sheets, if necessary.)	
		
		
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be pe Note: If the date inserted in this block does not most the app document's effective date on the Department of State's recor	(optional) rior to date of filing or more than 90 days after filing.) Pursuant to plicable statutory filing requirements, this date will not be	605,0207 (3) listed as the
he record specifies a delayed effective date, but the 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the ea	rlier of:
Dated MARCH 10 2017	7.	
Sharefully of a member of the	Olipotoci representative of a monitor	•
R. MASON SIMPSON	• • •	
	rinkla name of Algineo	•

Page 3 of 3 Filing Pear \$25.00