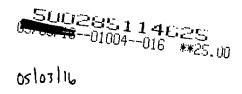
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COVER LETTER

SUBJECT:	ROSSER RE	SERVE, LLC		
SOBJECT.		Name of Limi	ted Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return	all correspon	dence concerning this matter t	o the following:	
		SUE R. PROSSER		
			Name of Person	
			Firm/Company	
		P. O. Box 132		
			Address	
		Oakland, FL 34760-0132		
			City/State and Zip Code	
		slpllc@earthlink.net		
		E-mail address: (t	o be used for future annual report no	tification)
For further in	iformation co	ncerning this matter, please ca	11:	
Sue Prosser			407 484-8036 at ()	
	Name of	Person		me Telephone Number
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)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 6, 2016

SUE R PROSSER P.O. BOX 132 OAKLAND, FL 34760-0132

SUBJECT: ROSSER RESERVE, LLC

Ref. Number: L14000196917

15 MAY 18 AM ID: 26
SECRETARY OF STATE
SECRETARY OF STATE

We have received your document for ROSSER RESERVE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned. (corrected from a facility

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 716A00009490



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROSSER RESERVE, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 114000196917	were filed on 4/3/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	15 WEST SPEER AVENUE	
(Principal office address MUST BE A STREET ADDRESS)	OAKLAND, FL 34760	16 SE
		AR 2 11
		100 mm
Enter new mailing address, if applicable:	P. O. BOX 132	
Mailing address MAY BE A POST OFFICE BOX)	OAKLAND, FL 34760-0132	is in C
		원수 2 6
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		enter the name of the ne
Name of New Registered Agent: SUE R. PROSS	ser 15 West Speer	AVENUE
New Registered Office Address:	Enter Florida street address	,
OAKLAND	Flor	rida 34760-0132
	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	TIMOTHY GREEN	121 SOUTH ORANGE AVENUE,	
		ORLANDO, FL 32801	■ Remove
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		 	□ Add
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Sective date, if other than the effective date is listed, the date interest If the date inserted in this cument's effective date on the	nust be specific and block does not m	cannot be prior to neet the applical		ore than 90 days after	
record specifies a delay The 90th day after the re	ed effective d ecord is filed.	ate, but not	an effective t	ime, at 12:01	a.m. on the earlier
edAPRIL 26		2016			
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		nember or author	izea representative	or a member	

Page 3 of 3

Filing Fee: \$25.00