# L15000108607

| (Re                     | questor's Name)   | <del> </del> |
|-------------------------|-------------------|--------------|
| (Ad                     | dress)            |              |
| (Ad                     | dress)            | •            |
| · (Cit                  | y/State/Zip/Phone | e #)         |
| PICK-UP                 | ☐ WAIT            | MAIL         |
| (Bu                     | siness Entity Nar | me)          |
| (Do                     | cument Number)    |              |
| Certified Copies        | _ Certificates    | s of Status  |
| Special Instructions to | Filing Officer:   |              |
|                         |                   |              |
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## **COVER LETTER**

| TO:       | Registration Se<br>Division of Cor |   |   |  |
|-----------|------------------------------------|---|---|--|
| eim ir    | SCN Belle                          | view, LLC                                       |   |  |
| SUBJE     | U1:                                | Name of Lim                                     | ited Liability Company  | <del></del>  |
| The enc   | losed Articles of                  | Amendment and fee(s) are sub                    | mitted for filing.  |  |
| Please re | eturn all correspo                 | ondence concerning this matter                  | to the following:   |  |
|           |                                    | Kenneth B. Kirkpatrick                          |   |  |
|           |                                    |   | Name of Person  |  |
|           |                                    | SCN Belleview, LLC                              |   |  |
|           |                                    |   | Firm/Company  |  |
|           |                                    | 2605 SW 33rd Street, Suite                      | e 200   |  |
|           |                                    |   | Address   |  |
|           |                                    | Ocala, FL 34471                                 |   |  |
|           |                                    |   | City/State and Zip Code   |  |
|           |                                    | paul@heritagemanagement                         | net<br>to be used for future annual report notif                    | Mark Co. N   |
| E C 4     |                                    | ·   | •   | ication)   |
| For furti | ner information c                  | oncerning this matter, please ca                | all:  |  |
| Paul Ay   | oub/                               |   | 352 482-0777<br>at ( )  |  |
|           | Name o                             | of Person                                       | Area Code Daytime   | Telephone Number   |
| Enclose   | d is a check for the               | he following amount:                            |   |  |
| \$25      | .00 Filing Fee                     | ☐ \$30.00 Filing Fee &<br>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:

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

|  |                                    | City  | Zip Code   |
|--|------------------------------------|---|--|
|  | Ocala,                             |   | ida <u>34471</u>   |
| New Registered Office Address:                         |                                    | Enter Florida stræt address                                 |  |
| Navy Pagistared Office Address                         | 2605 SW 33rd                       | Street, Suite 200   |  |
| Name of New Registered Agent:                          | Kenneth B. Kit                     | kpatrick  |  |
| gistered agent and/or the new registered office        | ce address her                     | <u>e</u> :  |  |
| . If amending the registered agent and/or              | _                                  |   | enter the name of the  |
|  |                                    |   |  |
| Jailing address MAY BE A POST OFFICE Bo                | <u>0X)</u>                         | Ocala, FL 34478   | ₩ <del>-</del>   |
| nter new mailing address, if applicable:               |                                    | P.O. Box 2495   | 5 <b>5</b> 5   |
|  |                                    |   |  |
|  |                                    |   | 2  |
| rincipal office address MUST BEA STREET                |                                    | Ocala, FL 34471   | MARKET THE PARTY OF THE PARTY O |
| nter new principal offices address, if applicat        | ole:                               | 2605 SW 33rd Street, Suite 200                              | and and  |
| e new name must be distinguishable and contain the wor | ds "Limited Liabi                  | ity Company," the designation "LLC" of                      | or the abbreviation "L.L.C."   |
| /A   |                                    |   |  |
| . If amending name, enter the new name of t            | he limited liab                    | ility company here:   |  |
| nis amendment is submitted to amend the follow         | ving                               |   |  |
| orida document number L15000108607                     | ·                                  |   |  |
| ne Articles of Organization for this Limited Liab      | bility Company                     | were filed on   | and assigned   |
|  |                                    | a IIINF 22 2015   |  |
| ( <u>Name of the Limited</u><br>(A                     | Liability Compa<br>Florida Limited | ny as it now appears on our records.)<br>Liability Company) |  |
| SCN BELLEVIEW LLC                                      |                                    |   |  |

#### 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>            | Address   | Type of Action |
|--------------|------------------------|---|----------------|
| Mgr          | Kenneth B. Kirkpatrick | 2605 SW 33rd Street, Suite 200<br>Ocala, FL 34471 | ■ Add          |
|              |                        |   | ☐ Remove       |
|              |                        |   | Change         |
| Mgr          | James E. Day           | 2605 SW 33rd Street, Suite 200<br>Ocala, FL 34471 | Add            |
|              |                        | ·   | ☐ Remove       |
|              |                        | <u> </u>  | Change         |
|              |                        | <del></del>                                       | Add            |
|              |                        |   | □ Remove       |
|              |                        |   | □ Change       |
|              | <del></del>            |   | □ Add          |
|              |                        |   | Remove         |
|              |                        |   | Remove         |
|              |                        |   | ☐ Change       |
|              |                        |   |                |
|              |                        |   | Remove         |
|              |                        |   | □ Change       |

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| ctive date, if other than the dat  | November 9, 2015   | (ontional)   |
| effective date is listed, the date must be s   | te of filing:specific and cannot be prior to date of filing or more the  | (optional) nan 90 days after filing.) Pursuant to 605.02   |
| effective date is listed, the date must be set. If the date inserted in this block of  | specific and cannot be prior to date of filing or more the does not meet the applicable statutory filing required.   | an 90 days after filing.) Pursuant to 605.03   |
| effective date is listed, the date must be set. If the date inserted in this block of  | specific and cannot be prior to date of filing or more the does not meet the applicable statutory filing required.   | an 90 days after filing.) Pursuant to 605.03   |
| effective date is listed, the date must be set of the date inserted in this block at the date inserted in the Department's effective date on the Department specifies a delayed effective at the delayed effective at the delayed effective at the date of the dat | specific and cannot be prior to date of filing or more the does not meet the applicable statutory filing requestion of State's records.  fective date, but not an effective time   | nan 90 days after filing.) Pursuant to 605.02<br>uirements, this date will not be listed                           |
| effective date is listed, the date must be set. If the date inserted in this block at the date on the Department's effective date on the Department specifies a delayed effectory.   | specific and cannot be prior to date of filing or more the does not meet the applicable statutory filing requestion of State's records.  fective date, but not an effective time   | nan 90 days after filing.) Pursuant to 605.02<br>uirements, this date will not be listed                           |
| e: If the date inserted in this block a<br>iment's effective date on the Depart  | specific and cannot be prior to date of filing or more the does not meet the applicable statutory filing requestion of State's records.  fective date, but not an effective time   | nan 90 days after filing.) Pursuant to 605.02<br>uirements, this date will not be listed                           |
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| effective date is listed, the date must be set of the date inserted in this block iment's effective date on the Department's effective date of the Departmen | specific and cannot be prior to date of filing or more the does not meet the applicable statutory filing requestment of State's records.  fective date, but not an effective time is filed.  | uirements, this date will not be listed  , at 12:01 a.m. on the earlier  |
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| effective date is listed, the date must be seen if the date inserted in this block ament's effective date on the Department's effective date of the Department's effective date of the Departme | specific and cannot be prior to date of filing or more the does not meet the applicable statutory filing requested the statu | nan 90 days after filing.) Pursuant to 605.02 uirements, this date will not be listed at 12:01 a.m. on the earlier |