Tavistock



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAVISTOCK DEVELOPMENT

Account Number : I20170000084 Phone : (407)909-9957 : (407)909-9957 Fax Number

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

Email Address:		
chidii Auuless.		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LN TOWNCENTER II, LLC

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

Help



COVER LETTER

	Registration Se Division of Cor			9
		enter II, LLC		
SUBJEC	T:		ited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	indence concerning this matter	to the following:	
		Michelle Dadisman		
			Name of Person	
		Tavistock Financial, LLC		
			Firm/Company	
		9350 Conroy Windermere	Road	
			Address	
		Windermere, FL 3476		
			City/State and Zip Code	
		michelle.dadisman@tavistu		
		E-mail address: (to be used for future annual report noti	fication)
For furth	er information c	oncerning this matter, please c	all:	
Michelle	Dadisman		407 909-9957	
*******	Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed	is a check for t	he following amount:		
	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Centified Copy (additional copy is enclased)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ING ADDRESS:	STREET/COUR) Registration Section	
Registration Section Division of Corporations		Division of Corpo		
		ox 6327 assec, FL 32314	Clifton Building 2661 Executive Co Tallahassee, FL 32	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now appears on our records.) mited Liability Company)
Company as it now appears on our records.) mitted Liability Company) appany were filed on April 20, 2016 and assigned
d liability company here:
1 Liability Company," the designation "LLC" or the abbreviation "L.L.C."
<u></u>
red office address on our records, enter the name of the ress here:
Enter Florido sireet address
, Florida
•
<u>1</u>

If Changing Registered Agent, Signature of New Registered Agent

4079099984

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
VP. T	Jeffrey S. Smith	6900 Tavistock Lakes Blvd.	🗆 Add
		Suite 200	■ Remove
		Orlando, F1. 32827	
VP, T Benjamin A Weaver	Benjamin A. Weaver	6900 Tavistock Lakes Blvd.,	☐ Change
		Suite 200	
		Otlando, F1. 32827	□ Remove
			Change
			□ Remove
			Change
			
			□ Remove
			☐ Change
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			□ Change

). If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary)
-	
	
Note: If the	late, if other than the date of filing:
f the record b) The 90	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: the day after the record is filed.
Dated <u>No</u>	Sentlack 14 . 2019.
	Signification of a member or authorized representative of a member
	Michelle R. Rencoret, Vice President & Secretary
	Typed or printed name of signee

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Filing Fee: \$25.00