

L17000141163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

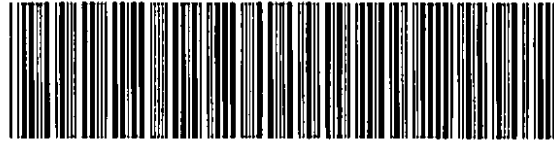
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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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CHARTERED  
ATTORNEYS AT LAW

756 BEACHLAND BOULEVARD, VERO BEACH, FLORIDA 32963

POST OFFICE BOX 3666, VERO BEACH, FLORIDA 32964-3666

TELEPHONE: 772-231-4343

FACSIMILE: 772-234-5213

EMAIL: CBC@VEROLAW.COM \* WEBSITE: WWW.VEROLAW.COM

BRUCE D. BARKETT <sup>1</sup>  
ISA THOMPSON BARNES <sup>2,3</sup>  
ALVIN B. BROWN  
NICHOLAS L. BRUCE <sup>2,7</sup>  
GEORGE G. COLLINS, JR. <sup>1</sup>  
MICHAEL J. GARAVAGLIA <sup>4</sup>  
ARON V. JOHNSON  
MICHAEL G. KISSNER, JR.  
DONALD KEITH LAWN <sup>2,6</sup>  
DOUGLAS VITUNAC

NATHAN D. BARKETT  
STEPHANIE M. HOCKE <sup>2</sup>

<sup>1</sup> BOARD CERTIFIED REAL ESTATE  
<sup>2</sup> MASTER OF LAWS TAXATION  
<sup>3</sup> MASTER OF LAWS REAL PROPERTY DEVELOPMENT  
<sup>4</sup> MASTER OF LAWS ESTATE PLANNING AND ELDER LAW  
<sup>5</sup> CERTIFIED CIRCUIT MEDIATOR  
<sup>6</sup> ALSO ADMITTED IN DC AND SC  
<sup>7</sup> ALSO ADMITTED IN GA  
<sup>8</sup> ALSO ADMITTED IN THE COMMONWEALTH OF  
THE BAHAMAS

WILLIAM W. CALDWELL, OF COUNSEL  
RALPH L. EVANS, OF COUNSEL  
STEVEN L. HENDERSON, OF COUNSEL <sup>1</sup>

July 21, 2017

VIA U.S. MAIL DELIVERY

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: 3315 Ocean Drive, LLC - Document No. L17000141163 - Articles of Amendment

Ladies/Gentlemen:

In connection with the referenced limited liability company I have enclosed our trust account check in the amount of \$25.00 which represents the filing fee for the enclosed Articles of Amendment to Articles of Organization of 3315 Ocean Drive, LLC. Please file the amendment accordingly.

Please feel free to give me a call if you have any questions concerning the enclosed.

Kindest regards,

COLLINS, BROWN, BARKETT,  
GARAVAGLIA & LAWN, CHARTERED



Dee Di Donato,  
Florida Registered Paralegal  
Legal Assistant to Steve L. Henderson, Esquire  
Of Counsel

/ddd  
Enclosure

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 3315 OCEAN DRIVE, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEVE L. HENDERSON, ESQUIRE

Name of Person

COLLINS, BROWN, BARKETT, GARAVAGLIA & LAWN, CHARTERED

Firm/Company

756 BEACHLAND BLVD.

Address

VERO BEACH, FLORIDA 32963

City/State and Zip Code

almcevoy5@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steve L. Henderson, Esquire

772

231-4343

at (

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing 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:**  
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

FILED  
17 JUL 24 AM 11:58

3315 OCEAN DRIVE, LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

STATE OF FLORIDA  
TALLAHASSEE

The Articles of Organization for this Limited Liability Company were filed on JUNE 29, 2017 and assigned Florida document number L17000141163.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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>	<u>Type of Action</u>
MGR	EDWARD BRUCE McEVOY	1995 WINDWARD WAY, VERO	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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