

K21 000 117765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

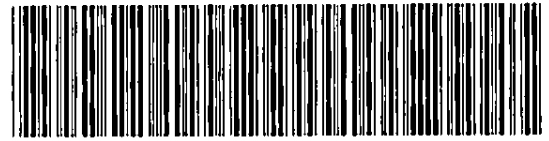
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

S.C.
07/20/21



100368718861

06/23/21--01008--010 **25.00

2021 JUN 23 AM 11:24

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 1543 PD, 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:

Douglas Lee Wright, Jr.

Name of Person
PD 1539, LLC, a Georgia limited liability company

Firm/Company
PO Box 419

Address
Greenville, GA 30222

City/State and Zip Code
dlwrightjr42@gmail.com

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

For further information concerning this matter, please call:

Theresa Knowler

Name of Person
239 333-4910
at ()
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)

REC'D
DIVISION OF CORPORATIONS
MAY 11 11:20 AM '06

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

1543 PD, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 3/11/2021 and assigned Florida document number 1.21000117765.

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:

1543 Piper Dunes Place

(Principal office address MUST BE A STREET ADDRESS)

Fernandina Beach, FL 32034

Enter new mailing address, if applicable:

PO Box 419

(Mailing address MAY BE A POST OFFICE BOX)

Greenville, GA 30222

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:

Douglas Lee Wright, Jr.

New Registered Office Address:

1543 Piper Dunes Place

Enter Florida street address

Fernandina Beach


Florida 32034

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.


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	1031 Reverse Exchange Company I	1520 Royal Palm Sq. Blvd. #320	<input type="checkbox"/> Add
		Fort Myers, FL 33919	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PD 1539, LLC	PO Box 419	<input checked="" type="checkbox"/> Add
		Greenville, GA 30222	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Douglas Lee Wright, Jr.	PO Box 419	<input checked="" type="checkbox"/> Add
		Greenville, GA 30222	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SONYA M. WRIGHT	PO Box 419	<input checked="" type="checkbox"/> Add
		GREENVILLE, GA 30222	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

