## LIICOOSU140

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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2015 NOV -2 P 4: 39
SECRETARY OF STATE
TALLAHASSEE FLOORES

HOV 03 Law BRUCE

## **COVER LETTER**

Div	ision of Cor	porations				
SUBJECT:	5 Acre LLC					
SUBJECT.		Name of Lim	ited Liability Company			
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Robin Lee Davis Trustee				
			Name of Person			
		5 Acre LLC				
			Firm/Company		•	
		1115 Hunt Club Lane				
			Address		•	
		Valrico, FL 33594				
			City/State and Zip Code	77	≥≃	
		bdrd@msn.com			2015 N	
		E-mail address: (	to be used for future annual report	notification)		-
For further in	nformation co	oncerning this matter, please c	all:	SSE	号 -2	
Robin Lee D	avis		813 727-234: at ( )			O
	Name o	f Person		ytime Telephone Number	$\mathcal{G}_{\mathcal{H}}$	
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status	

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5 Acre LLC			
( <u>Name of the Limi</u>	ted Liability Com (A Florida Limite	pany as it now appears on d Liability Company)	our records.)
The Articles of Organization for this Limited L	iability Compar	ny were filed on $\frac{7/26/20}{1}$	and assigned
lorida document number L11000086140			
his amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited lia	ability company here:	
The new name must be distinguishable and contain the	words "Limited Lia	ability Company," the design	nation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		<u></u>
		-	Se 2015
nter new mailing address, if applicable:		PO Box 47	ARE MARKET AND AREA THAN A SERVICE AND A SER
Mailing address MAY BE A POST OFFICE	BOX)	Valrico, FL 33595	E D
			FLORIDA STATE AND HE 30
3. If amending the registered agent and egistered agent and/or the new registered or and/or the new registered or an agent and/or the new registered or agent.			r records, enter the name of the ne
egistered agent una, or the new registered to	11100 411111 000 11	<u> </u>	
Name of New Registered Agent:	Robin Lee D	avis	
New Registered Office Address:	1115 Hunt C	lub Lane	
<del>-</del>		Enter Florida s	
	Valrico		, Florida <sup>33594</sup>
		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>	Address	Type of Action
MGRM	Robert William Davis Trustee	1115 Hunt Club Lane, Valrico, FL	Add
			■ Remove
			Change
			Add
			□ Remove
			Change
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ctive date, if other than the date of filing:	(0	optional)		
effective date is listed, the date must be specific and cannot be prior to date	of filing or more than 90 days	after filing.)	Pursuant	to 605.02
e: If the date inserted in this block does not meet the applicable st ument's effective date on the Department of State's records.	atutory filing requirements	, this date v	viii not c	e nsted
·				
record specifies a delayed effective date, but not an	effective time, at 12:0	)1 a.m. o	n the e	earlier
he 90th day after the record is filed.				
10.27.2015				
ed 10-27-2015				
Police Le Daus Signature of a member or authorized	1. +			
NOWA OLE NOULAND	ruelle			

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Filing Fee: \$25.00