## 16000136228

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AUG U C 201:

S. PRATHER

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 368487 4300400

AUTHORIZATION :

COST LIMIT : \$ 700

ORDER DATE : August 29, 2018

ORDER TIME : 3:54 PM

ORDER NO. : 368487-005

CUSTOMER NO: 4300400

DOMESTIC AMENDMENT FILING

NAME: 12791 CINQUETERRE LLC

EXAMINER'S INITIALS:

## **COVER LETTER**

	gistration Sec vision of Corp					
etto tezen.	12791 CINQ	UETERRE LLC				
SUBJECT:		Name of Limit	ted Liability Company			
The enclose	d Articles of A	.mendment and fee(s) are subn	nitted for filing.			
Please returi	n all correspon	dence concerning this matter t	o the following:			
		Michele K. Leibson, Esq				
			Name of Person			
Cleary Gottlieb Steen & Hamilton LLP						
Fint/Company						
One Liberty Plaza						
			Address			
	New York, NY 10006					
			City/State and Zip Code			
		MLeibson@cgsh.com	to be used for future annual report notifi	cation)		
For further	information co	encerning this matter, please ca		cultury		
Michele K.	. Leibson		212 225-2166	_		
Name of Person			Area Code Daytime	Telephone Number		
Enclosed is	a check for th	e following amount:				
□ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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

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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

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	رن د <sup>رن</sup> ،

	12791 CINQUETERRE LLC	
(Name of the Limited (A	Liability Company as it now appears on our rec Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liab Florida document number <u>L18000136228</u>	ility Company were filed on May 31, 2018	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
11626 Parrotfish Street LLC		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		
B. If amending the registered agent and/or registered agent and/or the new registered office		ords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ac	ddress
		Florida
	City	, Florida 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 Type of Action Address Title <u>Name</u> □ Add \_\_\_\_ Remove \_\_\_\_ Change \_\_ 🗆 Remove \_\_\_\_\_\_ Add \_\_\_ Change □ Add \_□ Remove \_\_ Change ☐ Remove \_\_ Change \_\_□ Add \_\_\_\_\_ Remove

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Filing Fee: \$25.00