

L00000009281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

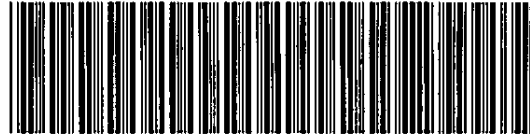
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/05/15--01017--001 \*\*1375.00

FILED  
15 APR 13 PM 4:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 14 2015  
T. LEMIEUX

*[Handwritten signature]*

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ADAIR PLAZA, L.L.C.

\_\_\_\_\_  
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:

Kelly Hooper

\_\_\_\_\_  
Name of Person

BishopBeale

\_\_\_\_\_  
Firm/Company

250 North Orange Avenue, Suite 1500

\_\_\_\_\_  
Address

Orlando, FL 32801

\_\_\_\_\_  
City/State and Zip Code

kelly@bishopbeale.com

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

For further information concerning this matter, please call:

Kelly Hooper

at ( 407 ) 426-7702

\_\_\_\_\_  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 12, 2015

YELLY HOOPER  
250 N ORANGE AVE STE 1500  
ORLANDO, FL 32801

SUBJECT: ADAIR PLAZA, L.L.C.  
Ref. Number: L00000009281

We have received your document for ADAIR PLAZA, L.L.C. and your check(s) totaling \$1375.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you are trying to file is not correct. You can not change a manager or member's address on a registered agent change. You will need to file a Amendment for the LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 315A00003040

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

ADAIR PLAZA, L.L.C.

(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 7/24/2000

Florida document number L00000009281

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 end with 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*

*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**

FILED  
15 APR 13 PM 4:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	William D. Bishop III Revoc	250 N. Orange Ave., Suite 1500	<input checked="" type="checkbox"/> Add
	William D. Bishop III Revocable Trust	Orlando, FL 32801	<input type="checkbox"/> Remove
MGR	Robert Whitney Duncan Jr.	250 N. Orange Ave., Suite 1500	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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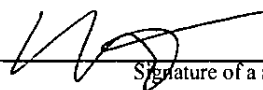
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 3, 2015

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
William D. Bishop III  
\_\_\_\_\_  
Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 12, 2015

YELLY HOOPER  
250 N ORANGE AVE STE 1500  
ORLANDO, FL 32801

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Ref. Number: L00000009281

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Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 815A00003040

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: Adair Plaza, LLC

2. (a) -recently changed via e-mail to Sunbiz (b) -recently changed via e-mail to Sunbiz

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

250 North Orange Ave., Suite 1500

Orlando, FL 32801

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

250 North Orange Ave., Suite 1500

Orlando, FL 32801

5/19/05

L00000009281

3. Date of filing/registration in Florida 4. Document number

5. (a) Authorized Person: Robert Whitney Duncan, Jr.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1321 Edgewater Dr.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 2

Orlando, FL, FL 32804

(b) same name as above

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

250 North Orange Ave.

**NEW** Registered Office Address:

Suite 1500

Orlando, FL 32801

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

William Bishop  
Printed or typed name of signee

*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 Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00