

(Requestor's Name)			
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(City/State/Zip/Phone #)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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G. MCLEOD			
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EXAMINER			



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DIVISION OF COEFFERENCE

COVER LETTER

TO: Registration Sec Division of Corp						
SUBJECT: Bestwood Investments, LLC						
(Name of Limited Liability Company)						
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.				
Please return all correspondence concerning this matter to the following:						
	•	·				
	Krystal G. Watson					
		(Name of Person)	····			
	Bestwood Investments, L	LC				
		(Firm/Company)				
	10250 Normandy Blvd, S	ite 702				
		(Address)	·			
	Jacksonville, FL 32221					
		(City/State and Zip Code)				
For further information cor	ncerning this matter, please ca	all.				
Tot larger intomitation con	neering this matter, prease en	шп				
Krystal G. Watson		at (904) 483-3300				
(Name of Person) (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
2 \$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 ARTICLES OF ORGANIZATION **OF**

Bestwood Investments, LLC					
- (<u>Name of the Limited</u> (A	<u>Liability Compar</u> Florida Limited L	ny as it now appears on our liability Company)	records.)		
The Articles of Organization for this Limited Li	ability Company	were filed on 1/22/2001		and ass	signed
Florida document number L01000001164	·				
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
The new name must be distinguishable and end wit	h the words "Limi	ted Liability Company " the	designation	"I LC" or the	abhreviation
The new name must be distinguishable and end with "L.L.C."	n me words Ema	ted Diabnity Company, the	uesignation	. DEC of the	9
Enter new principal offices address, if applic	able:	Bestwood Investments,	LLC	8	SES
(Principal office address MUST BE A STREET ADDRESS		8323 Ramona Blvd.		NOV	9倍
		Jacksonville, FL 32221		25	
Enter new mailing address, if applicable:		Bestwood Investments	LLC		
(Mailing address MAY BE A POST OFFICE	8323 Ramona Blvd.		<u>.</u>	1 -1	
1		Jacksonville, FL 32221		· · · · · · · · · · · · · · · · · · ·	San
B. If amending the registered agent and/ registered agent and/or the new registered of			ords, <u>ente</u>	er the name	of the new
Name of New Registered Agent:	Brant, Abra	aham, Reiter, McCon	mick &	Greene, PA	<u> </u>
New Registered Office Address: 50 N. LAURA STREET STE 2750					
		(Enter Flo	rida street	address)	
	JACKSONVIL		_, Florida		
		(City)		(Zip Co	de)
Now Degistered Agent's Signature if changing	Vogietored 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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Ronald W. Fussell	10250 Normandy Blvd, Ste 702 Jacksonville, FL 32221	Add Remove
MGRM	Lockwood P. Holmes	8323 Ramona Blvd Jacksonville, FL 32221	Add Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
D. If amend	ing any other information, enter c	hange(s) here: (Attach additional sheets, if necess	eary.)
			· ·
Dated October	VIII	ember or authorized representative of a member	·
	Lockwood P. Holm		

Page 2 of 2

Filing Fee: \$25.00