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Taylstock

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Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAVISTOCK DEVELOPMENT

Account Number : I20170000084 Phone : (407)909-9957 Fax Number : (407)909-9957

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TAVISTOCK DEVELOPMENT MANAGEMENT, LLC

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Corporate Filing Menu

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COVER LETTER

	Registration Sec Division of Corp			Ĉ.
		evelopment Management, LLC	•	
SUBJEC	Tr:	Name of Limi	ed Liability Company	
The encl	osed Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please re	eturn all correspor	ndence concerning this matter t	o the following:	
		Michelle Dadisman		
			Name of Person	
		Tavistock Financial, LLC		
		-	Firm/Company	
		9350 Conroy Windennere	Road	
		····	Address	-
	Windermere, Fl. 3476			
	City/State and Zip Code			
		michelle.dadisman@tavisto	ek.com	
		E-mail address; ()	o be used for future annual report not	fication)
For furth	ner information c	oncorning this matter, please or	ill:	
Michell	e Dadisman		407 909-9957 ar ()	
	Name o	f Person	at () Area Code Daytin	e Telephone Number
Enclose	d is a check for th	ne following amount:		
	.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)
	Registr Divisio P.O. B	ING ADDRESS: ation Section on of Corporations ox 6327 assec, FL 32314	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive C	on rations enter Circle

Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301

4079099984

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tavistock Development Management, LLC	•	
(Name of the Limited Liab (A Flori	Illty Company as it now appears on our records.) Ida Limited Liability Company)	
he Articles of Organization for this Limited Liability	Company were filed on February 26, 2002	and assigned
lorida document number	·	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lin	mited liability company here:	
he new name mus; be distinguishable and contain the words "L	imited Liability Company," the designation "L4.C" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or reg egistered agent and/or the new registered office ad	gistered office address on our records, <u>ente</u> <u>ldress bere</u> :	r the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida,	Zm 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>	Name	Address	Type of Action
VP. T	Jeffrey S. Smith	6900 Tavistock Lukes Blvd.	
		Suite 200	■ Remove
		Orlando, Fl. 32827	☐ Change
VP, T	Benjamin A. Weaver	6900 Tavistock Lakes Blvd.,	☐ Add
	<u></u>	Suite 200	Remove
		Orlando, FL 32827	□ Change
VP	Deborah J. DeMars	6900 Tavistock Lakes Blvd	
		Suite 200	
		□ Add	
			☐ Remove
·			Change
		_	
			□ Remove
		Change	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (If an 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 605.026 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier (b). The 90th day after the record is filed.
Dated Nipolicy 14 . 1579.
Signature of a member or authorized representative of a member
Michelle R. Rencoret, Vice President & Secretary
Typed or printed name of signee

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Filing Fee: \$25.00