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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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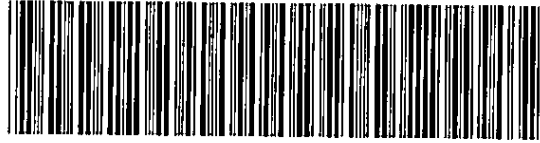
(Business Entity Name)

(Document Number)

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D CUSHING

COVER LETTER

**TO: Registration Section
Division of Corporations**

NEWCOMB PROPERTIES #2, L.L.C.

SUBJECT: _____
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:

Fred W. Newcomb, Jr.

Name of Person
NEWCOMB PROPERTIES #2 L.L.C.

Firm/Company
755 Estate Way

Address
Atlanta, Georgia 30319

City/State and Zip Code
fredwnewcomb@gmail.com

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

For further information concerning this matter, please call:

Fred W. Newcomb, Jr.

917 374-8888

Name of Person at (_____) _____
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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 OCT 16 PM 5:45

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

NEWCOMB PROPERTIES #2 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 May 3, 2002 and assigned
Florida document number 102000011115

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 contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2721 Charlestowne Drive W

Mobile, Alabama 36693

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

755 Estate Way

Atlanta, Georgia 30319

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: Northwest Registered Agent L.L.C.

New Registered Office Address: 7901 4th Street N STE 300

Enter Florida street address

St. Petersburg

Florida

33702

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jacqueline M. Newcomb	2721 Charletowne Drive W Mobile, Alabama 36694	☒ Add
			☐ Remove
			☐ Change
AMBR	Fred W. Newcomb, Jr	755 Estate Way Atlanta, Georgia 30319	☒ Add
			☐ Remove
			☐ Change
MGR	Fred W. Newcomb	5909 Turin Street Coral Gables, Florida 33146	☐ Add
			☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

October 17, 2019

E. Effective date, if other than the date of filing: _____ (optional)

(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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 of:

(b) The 90th day after the record is filed.

Dated October 14, 2019

Signature of a member or authorized representative of the contractor

Signature of a member or authorized representative of a member

Fred W. Newcomb, Jr.

Typed or printed name of signee