

L04000051707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

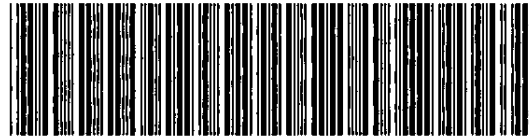
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13 JUN -3 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

✓ TO: Registration Section
Division of Corporations

SUBJECT: Seahorse Mobile Home Park, LLC
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:

Marion or John Felgate
Name of Person

J & J Enterprises
Firm/Company

2815 Concord Road
Address

Melrod FL. 32720
City/State and Zip Code

JWF2815@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Felgate at (386) 736-1620
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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
TO
ARTICLES OF ORGANIZATION
OF**

Seahorse Mobile Home Park, LLC
(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 _____ and assigned
Florida document number _____.

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)

2815 Concord Rd
Deland, FL 32720

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2815 Concord Rd
Deland, FL 32720

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:

John W. Felgate
2815 Concord Rd
Enter Florida street address
Deland, Florida
City

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TALLAHASSEE, FLORIDA

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 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.

John W. Felgate
If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
MGR	John V. Felgate	2815 Concord Rd	<input checked="" type="checkbox"/> Add
		Deland, FL 32720	<input type="checkbox"/> Remove
MGRM	Sharon L. Felgate	2815 Concord Rd.	<input checked="" type="checkbox"/> Add
		Deland, FL 32720	<input type="checkbox"/> Remove
MGR	Stephen Glover	132 Riverwalk CT.	<input type="checkbox"/> Add
		Ormond Beach FL 32176	<input checked="" type="checkbox"/> Remove
MGR/Sr.	Jane K Glover	132 Riverwalk CT	<input type="checkbox"/> Add
		Ormond Beach, FL 32176	<input checked="" 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.)

Please change ETN# to 46-1887219
See attached SS-4 form.
" " Reviewer's ID.
" " Certificate for LLC.

Dated May 28, 2013.

Sharon L. Felgate
Signature of a member or authorized representative of a member

Sharon L. Felgate
Typed or printed name of signer

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Filing Fee: \$25.00