105000010832

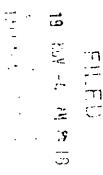
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |

Office Use Only



400336029354

11/04/19--01011--015 **25.00



DEC 04 2019 S. YOUNG

COVER LETTER

TO:

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

| Division o | f Corporations | | | | | |
|---------------------------|--|---|---|--|--|--|
| 4-BE. SUBJECT: | ACHES REALTY, LLC | | | | | |
| SOBJECT: | Name of Lin | nited Liability Company | | | | |
| The enclosed Articl | les of Amendment and fee(s) are sub | omitted for filing. | | | | |
| Please return all cor | rrespondence concerning this matter | to the following: | | | | |
| | JESICA CAVEY | | | | | |
| | | Name of Person | | | | |
| | 4-BEACHES REALTY, I | .LC | | | | |
| | Firm/Company | | | | | |
| | 806 THRD STREET, SU | 806 THIRD STREET, SUITE D | | | | |
| | | Address | | | | |
| | NEPTUNE BEACH, FL. | 32266 | | | | |
| | City/State and Zip Code | | | | | |
| | jesica.cavey@comcast.net | (to be used for future annual report not | dication) | | | |
| For further informa | tion concerning this matter, please c | · | , | | | |
| CRAIG L. AMES | | 904 654-3518 | | | | |
| N. | ame of Person | Area Code Daytin | e Telephone Number | | | |
| Enclosed is a check | for the following amount: | | | | | |
| ■ \$25.00 Filing F | ce S30.00 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) | | | |
| R | IAILING ADDRESS: egistration Section | STREET/COUR! Registration Section Division of Course | on | | | |

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 4-BEACHES REALTY, LLC | | | · • • • • • • • • • • • • • • • • • • • |
|---|--|------------------------------|---|
| (Name of the Lim | ited Liability Company as it now appear (A Florida Limited Liability Company) | s on our records.) | = - |
| ne Articles of Organization for this Limited I orida document number L05000010832 | | | and assigned |
| nis amendment is submitted to amend the fol | lowing: | | |
| . If amending name, enter the new name of | of the limited liability company he | <u>re</u> : | |
| he new name must be distinguishable and contain the | words "Limited Liability Company," the d | esignation "LLC" or the abbr | eviation "L.L.C." |
| nter new principal offices address, if appli | cable: | | |
| Principal office address MUST BE A STRE | ET ADDRESS) | | |
| Inter new mailing address, if applicable: | | | |
| Hailing address MAY BE A POST OFFICE | C ROV | | |
| rating data ess may be a 1031 071 1CE | <u></u> | | |
| | | | |
| If amending the registered agent and egistered agent and/or the new registered of | | our records, enter th | ne name of the |
| Name of New Registered Agent: | ABEL BEAN LAW, P.A. | | |
| New Registered Office Address: | 50 N. LAURA STREET, SUITE 2 | 2500 | |
| - | Enter Flor | ida street address | |
| | JACKSONVILLE | , Florida <u>3220</u> | 12 |
| | City | | Zıp 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> | Address | Type of Action |
|--------------|-------------------|---------------------------|----------------|
| VP | LAWRENCE H. CAVEY | 806 THIRD STREET, SUITE D | |
| | | NEPTUNE BEACH, FL 32266 | |
| | | | ■ Remove |
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| | | | Change |

| R | EBECA GRASLEY, AMBR. IS THE VICE PRESIDENT & MANAGING BROKER OF |
|------------------------|--|
| 4- | BEACHES REALTY, LLC |
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| etiv | re date, if other than the date of filing: |
| effec <u>e:</u> I | ctive 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 605.02 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed on the Department of State's records. |
| | and specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier 90 th day after the record is filed. |
| ed | 10-29-19 |
| | Signature of a member or authorized representative of a member |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00