

205000037456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

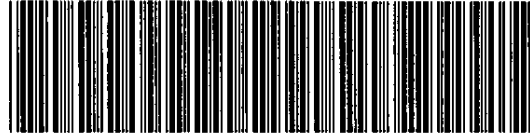
(Business Entity Name)

(Document Number)

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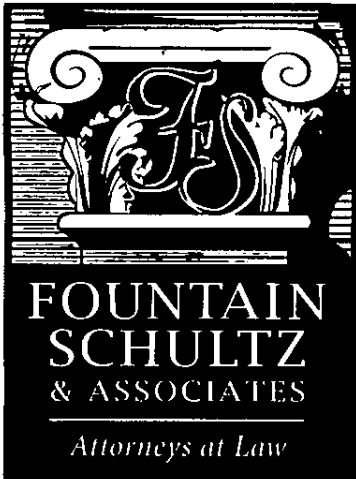
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COURT
JULIA A. BROWN, CLERK

15 MAR 16 AM 11:55

FILED



KENNETH R. FOUNTAIN
KERRY ANNE SCHULTZ
SCOTT C. BRIDGFORD

March 12, 2015

VIA REGULAR US MAIL

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Four Palm Properties, L.L.C.

Dear Sir or Madam:

The enclosed Articles of Amendment are submitted for filing. Also enclosed is check # 4584 in the amount of \$25.00 for the filing fee.

Please return in self-addressed stamped envelope that is provided.

Thank you for your consideration.

Sincerely,

FOUNTAIN, SCHULTZ & ASSOCIATES, PL

Kerry Anne Schultz, Esquire

KAS/cam
Enclosed as stated

2045 FOUNTAIN PROFESSIONAL CT.
SUITE A
NAVARRE, FLORIDA 32566
TEL: (850) 939-3535
FAX: (850) 939-3539

SANTA ROSA BEACH
TEL: (850) 622-2700
FAX: (850) 622-2722

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FOUR PALM PROPERTIES, L.L.C.

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:

KERRY ANNE SCHULTZ

Name of Person

FOUNTAIN, SCHULTZ & ASSOCIATES

Firm/Company

2045 FOUNTAIN PROFESSIONAL COURT, SUITE A

Address

NAVARRE, FL 32566

City/State and Zip Code

KASCHULTZ@FOUNTAINLAW.COM

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

For further information concerning this matter, please call:

KERRY ANNE SCHULTZ

at (**850**) **939-3535**

Name of Person

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

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

FOUR PALM PROPERTIES, 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 04/15/2005 and assigned
Florida document number L05000037548.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Enter Florida street address

 , Florida

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
P	ALLEN NETZER, JR.	1764 CONDOR DR	<input type="checkbox"/> Add
		CANTONMENT, FL 32533	<input checked="" type="checkbox"/> Remove
T	ROSS, BRYAN	6927 KELVIN TERR	<input type="checkbox"/> Add
		PENSACOLA, FL 32503	<input checked="" type="checkbox"/> Remove
MGR	ALLEN NETZER, JR.	1764 CONDOR DR	<input checked="" type="checkbox"/> Add
		CANTONMENT, FL 32533	<input type="checkbox"/> Remove
AMBR	ROSS, BRYAN	6927 KELVIN TERR	<input checked="" type="checkbox"/> Add
		PENSACOLA, FL 32503	<input type="checkbox"/> Remove
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

15 MAR 16 2:11:55
FBI
PENSACOLA

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: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

3/11/15

Signature of a member or authorized representative of a member

KERRY ANNE SCHULTZ, ESQUIRE

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
15 MAR 16 AM 11:55