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D. BRUCE SEP 2 1 2012 **EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	Moultrie	Moultrie Properties, LLC		
		ited Liability Company	<del></del>	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	condence concerning this matte	r to the following:		
		John B. Moss Name of Person		
		Name of Felson		
	He	ad, Moss & Fulton, P.A.		
		Firm/Company	·	
	1530 B	usiness Center Drive, Suite 4	12 S	
		Address		
	Fl	eming Island, FL. 32003	SEP 20 PM 12: 43 CRETARY OF STATE LAHASSEE, FLORIO	
		City/State and Zip Code		
	imo	ss@headmossfulton.com	7 7 7	
	E-mail address:	to be used for future annual report notification	n) 92 :	
For further information	concerning this matter, please	call:		
· J	ohn B. Moss	at ( 904 ) 278	-8200	
Name of Person		Area Code & Daytime Tele	phone 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)	
MAI	LING ADDRESS:	STREET/COURIER A	ADDRESS:	

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M	oultrie Properties, LLC.					
( <u>Name of the Limited )</u> (A	Liability Company as it now appear Florida Limited Liability Company)	ars on our records.)	<del></del>			
The Articles of Organization for this Limited Lia	• • • —	11/08/2006	and assigned			
Florida document numberL06000108	<u>827                                    </u>					
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liability company he	ere:				
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	pany," the designation "Ll	LC" or the abbreviation			
Enter new principal offices address, if applica	ble:					
(Principal office address MUST BE A STREE)	ADDRESS)		TAS			
		- · · · · · · · · · · · · · · · · · · ·	- C 2			
			罗罗			
Enter new mailing address, if applicable:			SSE CO FA			
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>			
	<del>*</del>		1 (C)			
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, enter th	ie name of the new			
registered agent and/or the new registered off	ice address nere:					
Name of New Registered Agent:	John B. Moss					
New Registered Office Address:	New Registered Office Address: 1530 Business Center Drive, Suite 4					
Enter Florida street address						
	Fleming Island	, Florida	32003			
	City		Zip Code			
New Degistered Agent's Signature if changing D.	agistored Agent.					

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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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>	Name	Address	Type of Action
MGRM	Harry E. Bell	4756 Saddlehorn Trail Middlehurg, FL 32068	Add  Remove
MGRM_	Frank T. Spencer, Jr.	4756 Saddlehorn Trail Middleburg, Fl. 32068	✓ Add ☐ Remove
<del> </del>			Add Remove
			AddRemove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter o	change(s) here: (Attach additional sheets, if neces	12 SEC ALL.
 			12 SEP 20 PH 12: 4 SECRETARY OF STATE ALL AHASSEE, FLOW
Dated	Sqpt 19 -2	2012	- 10 A
	Signature of a m	ember or authorized representative of a member	
	·	Frank T. Spencer, Jr. Typed or printed name of signee	

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Filing Fee: \$25.00