

L06000 1225F1

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

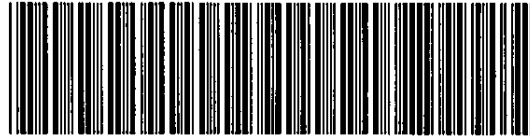
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/14/14--01025--003 **1201.25

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Walnut Road 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:

Lisa G Turner
Name of Person

Firm/Company

317 Windy Run Dr
Address

Doylestown PA 18901
City/State and Zip Code

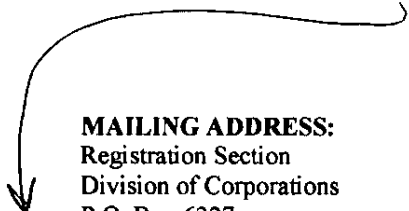
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa G. Turner at (267) 261-0261
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 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

\$ 1071.25 Annual report fees due
\$ 100.00 Reinstatement fee
\$ 5.00 Certificate of status fee
\$ 25.00 Articles of Ammendment

TO
ARTICLES OF ORGANIZATION
OF

Walnut Road 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 12/27/06 and assigned
Florida document number L06000122581

This amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

53 Walnut Road LLC

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)

2132 Northumbria Dr.
Sanford FL 32771

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

317 Windy Run Dr
Doylestown PA 18901

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:

Lisa G. Turner

New Registered Office Address:

2132 Northumbria Dr

Enter Florida street address

Sanford

City

Florida

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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.

Lisa G. Turner

If Changing Registered Agent, Signature of New Registered Agent

N/A

E. Effective date, if other than the date of filing: 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 10/14/14

Lisa G. Turner

Signature of a member or authorized representative of a member

Lisa G. Turner

Typed or printed name of signee

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Filing Fee: \$25.00

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