

LD7000126433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

DEC 22 2017

Y SULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 12, 2017

TURTLEMOUND LIVING, L.L.C.  
2538 MILLSTONE PLANTATION RD  
TALLAHASSEE, FL 3212

SUBJECT: TURTLEMOUND LIVING, L.L.C.  
Ref. Number: L07000126433

We have received your document for TURTLEMOUND LIVING, L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 617A00025114

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Turtlemound Living, LLC  
Name of Limited Liability Company

2017 DEC 22 AM 11:26  
TALLAHASSEE, FL 32301

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Ruark  
Name of Person

-  
Firm/Company

2538 MILLSTONE PLANTATION ROAD  
Address

TALLAHASSEE, FLA 32312  
City/State and Zip Code

LISARUARK16@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LISA RUARK at (850) 556-7945  
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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|--|
- ALREADY PAID

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

Turtlemound Living, 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 7-3-2008 and assigned  
Florida document number LO7000126433

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 contain 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)

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TALLAHASSEE, FLORIDA

**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 Ruark

New Registered Office Address:

2538 Millstone Plantation Road  
Enter Florida street address

Tallahassee

Florida

32312

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 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>	<u>Address</u>	<u>Type of Action</u>
Mrs. MGR	Lisa Ruark	2538 MILLSTONE PLANTATION ROAD TALLAHASSEE, FLA 32312	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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TALLAHASSEE, FLORIDA

(b) The 90th day after the record is filed.

The 30th day after the record is filed.  
 Dated Dec 20th 2017  
  
 Signature of a member or authorized representative of a member  
Lisa Ruark  
 Typed or printed name of signee