

108000013237

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2018 APR 13 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: St. Mark's Pond Property, 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:

Amy Marie Vo, Esq.

Name of Person

St. Johns Law Group

Firm/Company

104 Sea Grove Main Street

Address

St. Augustine, Florida 32080

City/State and Zip Code

avo@sjlawgroup.com

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

For further information concerning this matter, please call:

Amy Marie Vo, Esq.

904 495-0400

at (_____) _____

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**

St. Mark's Pond Property, 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 02/06/2008 and assigned
Florida document number L08000013237.

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)

620 South Holmes Boulevard

St. Augustine, Florida 32084

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

620 South Holmes Boulevard

St. Augustine, Florida 32084

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:

Amy Marie Vo, Esq.

New Registered Office Address:

104 Sea Grove Main Street

Enter Florida street address

St. Augustine

City

, Florida

32084

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

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2018 APR 13 PM 11:05
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TALLAHASSEE, FLORIDA

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>
MGR	Notre Dame Investors, Inc.	64 Green Street	<input checked="" type="checkbox"/> Add
		Warner Robins, Georgia 31093	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Biomass Harvesting Solutions L.L.C.	620 South Holmes Boulevard	<input checked="" type="checkbox"/> Add
		St. Augustine, Florida 32084	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	St Marks Pond Holdings LLC	101 E. Town Place, Suite 150	<input type="checkbox"/> Add
		St. Augustine, Florida 32092	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

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

Dated April 11 2018

Signature of a member

Signature of a member or authorized representative of a member

James W. Hill, President of Notre Dame Investors, Inc.

Typed or printed name of signee