## Florida Department of State

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN L.W. YOUNG INVESTMENTS, LLC

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Corporate Filing Menu

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## **COVER LETTER**

то:	Registration Se Division of Cor			
SUBJEC	LW Your	ng Investments, LLC		
3011/120	~ ! ·	Name of Limit	ed Liability Company	
The encl	osed Articles of	Amendment and fee(s) are subm	nitted for filing.	·
Please re	cturn all correspo	ndence concerning this matter t	o the following:	
		Keith C. Durkin		
			Name of Person	
Broad and Cassel				
			Firm/Company	
	390 North Orange Avenue, Suite 1400			
	Orlando, Florida 32801  City/State and Zip Code			
		lwy@lwyoung.com		
For furth	er information c	e-man aggress: (u oncerning this matter, please ca	o be used for future annual report notific	2(1(96)
		oncertaing this matter, prouse ca		
Keith	C. Durkin		407 839-4289 at ()	Felephone Number
	Name o	f Person	Area Code Daytime 7	Felephone Number
Enclosed	d is a check for th	ne 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		STREET/COURIE Registration Section Division of Consorat		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LW Young Investments, LLC		
(Name of the Limited Limbility Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L08000013809	y were filed on 02/07/2008	and assigned
This amendment is submitted to amend the following:		•
A. If amending name, enter the new name of the limited lia	bility company here:	15 TALL
The new name must be distinguishable and end with the words "Limited Lin	ibility Company," the designation "Li.C" o	r the abbreviation L.L.Cr
Enter new principal offices address, if applicable:	ncipal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)		FESTAL BOOK
Enter new mailing address, if applicable:		T.F. NOAN
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he  Name of New Registered Agent:  New Registered Office Address:		nter the name of the new
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of my duties, and l provided for in Chapter 605, F.S	am familiar with and . Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

5/006

Fax Server

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:

AMBR = Authorized Member Type of Action <u>Title</u> <u>Name</u> Address Erin P. Young PO Box 2409 MGR \_□ Add Orlando, Florida 32802 \_**≡** Remove \_\_ PO Box 2409 MGR James LaHam □ Add Orlando, Florida 32802 Remove MGR Lance W. Young Lance W. Young 390 North Orange Avenue, Suite 1400 Orlando, Florida 32801 ☐ Remove \_\_ 🗆 Add \_□ Remove \_\_\_\_ ☐ Remove

If amending any other information, enter change(s) here: (Atta	ach additional sheets, if necessary.)
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date	(optional)
the date this document is filed by the Florida Department of State)	
Dated Floruary 5 2015	
	·
Signature of a member or authorized re	presentative of a member
Lance W. Young, authorized representative	
Typed or printed name	of signee

Page 3 of 3

Filing Fee: \$25.00