L08000068236

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900329049239

05/06/19--01027--016 **25.00

2019 HAY -6 P 2 30

ACTUATION OF THE SECOND

COVER LETTER

WestBridg	ge Florida properties. LLC		
SUBJECT:		aited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Kevin Keefe		
	WestBridge Florida Prope	Name of Person rties, LLC	
	7300 Grove Road	Firm/Company	
	Brooksville, FL 34613	Address	
	compliance@westbridge.or		
For further information	E-mail address: (concerning this matter, please of	to be used for future annual report notif all:	leation)
Kevin Keefe		603 634-4446 at () Area Code Daytime	
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:

TO:

Registration Section Division of Corporations

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

WestBridge Florida Properties, LLC

FILED

(Name of the Limited Liability C (A Florida Li	Company as it now appears on mited Liability Company),	our records.)
	= :	
The Articles of Organization for this Limited Liability Con Florida document number 1.08000068236	MILAHATO	L. H.C. Min A
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		r records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	street address
	City	. Florida Zip Code
New Registered Agent's Signature, if changing Registered A	•	<i>Σι</i> ρ Coae

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>	Type of Action
P	Woods, Mary R	1361 Elm St., Suite 207 Manchester, NH 03101	
		.	■ Remove
			Change
CEO	Berry, Steven	660 Chestnut Street Manchester, NH 03104	
			🗖 Remove
			☐ Change
Ť	Geib, Teresa	660 Chestnut Street Manchester, NH 03104	Add
			□ Remove
			Change
VPS	West, Alfred P	660 Chestnut Street Manchester, NH 03104	□ Add
			□ Remove
			■ Change
		 -	
			□ Remove
			Change
			Remove
			Change

			
	<u> </u>		
	<u> </u>		
Effective date, if other than	the date of filing:	(optional)	0001 (D) A
Note: If the date inserted in thi	is block does not meet the applicable see Department of State's records.	te of filing or more than 90 days after filing.) Pursuant to 605, statutory filing requirements, this date will not be listed	das the
the record specifies a dela	yed effective date, but not an record is filed.	effective time, at 12:01 a.m. on the earlie	r of:
The 90th day after the			
The 90th day after the	2019		
The 90th day after the o	, 2019		
The 90th day after the	2019 Signature of a member or authorized	representative of a member	

Page 3 of 3

Filing Fee: \$25.00