

1090000 23065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

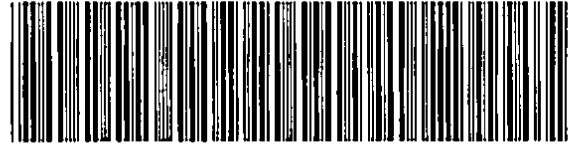
(Business Entity Name)

(Document Number)

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03/18/20-01022 112 \$655.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 MAR 18 PM 3:26

Amend

APR 03 2020

D CUSHING

LAW OFFICES OF

H. GREG LEE, P.A.

SARASOTA • VENICE

REPLY TO:
2601 CATTLEMEN ROAD, SUITE 503
SARASOTA, FLORIDA 34232
(941) 954-0067
FAX (941) 365-1492

BRANCH OFFICE:
735 E. VENICE AVE., 2ND FLOOR
VENICE, FLORIDA
(941) 484-0067

ATTORNEY:
DAVE M. EVANS, JR

Department of State
Division of Corporations
Attn: LLC Filings Dept.
P.O. Box 6327
Tallahassee, FL 32314

RE: LMP Bent Oak, LLC

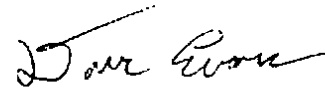
To Whom It May Concern,

Please find the enclosed Articles of Amendment to Articles of Organization of L M P Bent Oak LLC, along with a filling fee and certified copies fee. Please send certified copies to:

H. Greg Lee, P.A.
Attn: Dave M. Evans, Jr. Esq.
2601 Sarasota, Fl 34232 Suite 503

If you have any questions, please contact me directly at 941-993-8281 or my office at 941-954-0067.

Sincerely,



Dave M. Evans, Jr.
Attorney at Law

FILED
DIVISION OF CORPORATIONS
20 MAR 16 PM 3:26

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: L M P BENT OAK L.L.C.
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:

Dave Evans, Esq.

Name of Person

Law Firm of H. Greg Lee, P.A.

Firm/Company

2601 Cattlemen Road Suite 503

Address

Sarasota, FL 34262

City/State and Zip Code

pearcepad@gmail.com

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

For further information concerning this matter, please call:

George Pearce

941

951-2330

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
DIVISION OF CORPORATIONS
20 MAR 18 PM 3:25

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

L M P BENT OAK L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
20 MAR 18 PM 3:26
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on March 9, 2009 and assigned
Florida document number L09000023065.

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)

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: George Pearce

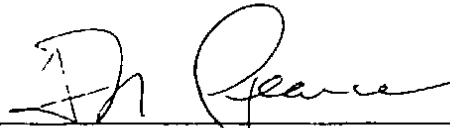
New Registered Office Address: N/A

Enter Florida street address

_____, Florida
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>
MGR	George Pearce	1703 North Drive Sarasota, FL 34239	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Linda Pearce		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1703 North Drive Sarasota, FL 34239	<input checked="" 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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			<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.)*

George Pearce will become the Manager and Registered Agent of the LLC and Linda Peace will be removed as manager, but she shall remain a member thereof. The manager shall have the ability to make all decision without the approval of any member.

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 _____

3/13/20

Linda M Pearce

Signature of a member or authorized representative of a member

Linda M. Pearce

Typed or printed name of signer

Filing Fee: \$25.00