

LOS0000 27124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

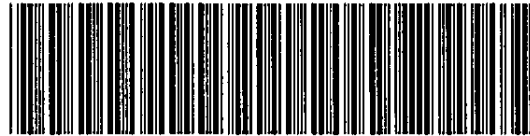
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers OCT 15 2014

October 9, 2014

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

To Whom It May Concern,

Attached are the forms and \$25.00 check payable to the Florida Department of State to change the Articles of Amendment to Articles of Organizations company address, mailing address, registered agent and members of Florida Specialty Homes, LLC document number L09000027124.

Please do not hesitate to contact Eric Waddell at 321-578-2501 or email eric@onerescorp.com for any questions regarding this request for changes. Thank you for help in updating our company's information.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric Waddell", written in a cursive style.

Eric J. Waddell
8297 Championsgate Blvd, #402
Championsgate, Florida 33896

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **FLORIDA SPECIALTY HOMES, 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:

Eric Waddell

Name of Person

New Vision Holdings

Firm/Company

8297 Championsgate Blvd #402

Address

Championsgate, Florida 34747

City/State and Zip Code

eric@onerescorp.com

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

For further information concerning this matter, please call:

Eric Waddell

Name of Person

at **(321) 578-2501**

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**

FLORIDA SPECIALTY HOMES, 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 03/19/2009 and assigned
Florida document number L09000027124.

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 end with 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)

1218 Molona Street
Reunion, Florida 34747

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

8297 Championsgate Blvd
Number 402
Championsgate, Florida 33896

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:

New Vision Holdings

New Registered Office Address:

8297 Championsgate Blvd, #402

Enter Florida street address

Championsgate

City

Florida

33896

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 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:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	David Dowell	5036 Dr. Phillips Blvd	<input checked="" type="checkbox"/> Add
		Number 245	<input type="checkbox"/> Remove
		Orlando, Florida 32819	
MGRM	Amy R. Owen	707 West Park	<input type="checkbox"/> Add
		Celebration, Florida 34747	<input checked="" type="checkbox"/> Remove
MGRM	EMZA	1107 Rush Court	<input type="checkbox"/> Add
		Celebration, Florida 34747	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated October 9 2014



Signature of a member or authorized representative of a member

Eric Waddell, Manager New Vision Holdings

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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