

L09000051102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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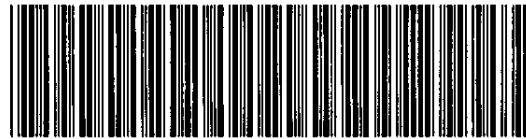
(Business Entity Name)

(Document Number)

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2013 NOV 18 PM 4:44
FALLAHASSEE, FLORIDA

B. BOSTICK

NOV 19 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Edwards Canal Side Properties, 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:

Chester Edwards

Name of Person

Edwards Canal Side Properties, LLC

Firm/Company

306 S.E. Monterey Road

Address

Stuart Florida 34994

City/State and Zip Code

fivestarhousing6comcast.net

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

For further information concerning this matter, please call:

Chester Edwards

Name of Person

at (772) 223-1179

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

FILED
TALLAHASSEE, FL
2013 NOV 16 PM 4:44

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

Edwards Canal-Side Properties, 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 5.26.09 and assigned
Florida document number LD9000051102

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)

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:

Chester J. Edwards

New Registered Office Address:

306 S.E. Monterey Rd.

Enter Florida street address

Stuart

City

FL. 34994

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 608, 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 Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Renee Edwards	6304 S.W. Bush St	<input type="checkbox"/> Add
		Palm City, FL 34990	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10-18-01 BY 4414

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

Dated _____



Signature of a member or authorized representative of a member

Chester J. Edwards

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 NOV 18 PM 4:44
TALLAHASSEE, FLORIDA