L09 000052083

(Requestor's Name)
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COVER LETTER

TO: Registration Se Division of Cor				
Ravenwood	1 Homes LLC	"		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	David Wishtischin			
		Name of Person		-
	Ravenwood Homes LLC			
		Firm/Company		-
	3321 Chiquita Blvd S			
		Address		-
	Cape Coral Fl 33914			
		City/State and Zip Code		-
	David.ravenwoodhomes@g			
For further information c	E-mail address: (oncerning this matter, please ca	to be used for future annual repail:	port notification)	2020 374
David Wishtischin		239 691-1 at ()	581	2020 SEP -
Name o	f Person		Daytime Telephone Numbe	
Enclosed is a check for the	ne following amount:			5.37
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	ed) Certified	iling Fee, ate of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ravenwood 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 5/29/2009 and assigned Florida document number L09000052083 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: New Registered Office Address: Enter Florida street address

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.

City

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>	Address	Type of Action
MGR	Brittany Wishtischin	1254 SW 4th Ave Cape Coral Fl 33991	■Add
			□ Remove
			□Change
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			□Remove
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ctive date, if other than th	e date of filing:		(option:	al)	
effective date is listed, the date mu	ist be specific and cannot be prior	to date of filing or mor	e than 90 days after till	ng.) Pursuar	nt to 605.020
 e: If the date inserted in this burnent's effective date on the I 			requirements, this di	ite will not	, de listed a
ord specifies a delayed effecti filed.	ve date, but not an effective t	ime, at 12:01 a.m. oi	the earlier of: (b)	The 90th d	lay after the
August 24th	2020			_	
					<u>.</u>
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Typed or printed name of signee