L0900082021

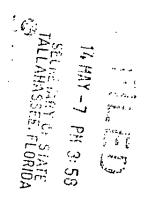
(Req	uestor's Name)	
(Add	ress)	
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(City/	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number))
Certified Copies	Certificate	s of Status
Special Instructions to Fi	iling Officer:	

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J. Sinvers MAY 1 5 2014



April 29, 2014

ALEXANDRA TAYLOR BLAKELY 7040 SEMINOLE PRATT WHITNEY RD 25-160 LOXAHATCHEE, FL 33470

SUBJECT: CHELSEA HOME BUYERS LLC

Ref. Number: L09000082021

We have received your document for CHELSEA HOME BUYERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 214A00009111

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

O: Registration Section Division of Corporations
SUBJECT: Chelsea Home Buyers 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:
Alexandra Taylor Blakely Name of Person
Firm/Company
7040 Seminale Pratte Pratt Whitney Rd Suite 25-160 Address
Loxabatchee FL 33470 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alexandra Taylor Blakely at (954) 598 4215 Name of Person Name of Person Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \cent{Certified Copy} \\ (additional copy is enclosed) \$\Bigcup \{ (additional copy is enclosed) }\Bigcup \{ (additiona

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

LICEISER 41 one	Boyers LLC.
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)
·	
The Articles of Organization for this Limited Liability Comp	any were filed on $8/25/09$ and assigned
Florida document number <u>LO9000820</u>	21
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	2
7	
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	
	·
	-
B. If amending the registered agent and/or registered	d office address on our records, enter the name of the new
registered agent and/or the new registered office address	here:
	ALL ALL
Name of New Registered Agent:	
	in the second
New Registered Office Address:	W. C. Carrier
	Enter Florida street address
·	Florida
· · · · · · · · · · · · · · · · · · ·	City Zip Code ***
New Registered Agent's Signature, if changing Registered Age	ent:
I hereby accent 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 compl	
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 off	fice 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

Č.

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 = Ma $AMBR = Au$	anager athorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	ChelseaTaylor	2 Honey In West.	Add
	,	Address 2 Honey In West. Miller Place, NY 117	Remove
			🗆 Add
			□ Remove
			□ Add
			☐ Remove
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			Remove
			Add
			Remove

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•	•		
	other than the date of fili	ing: 4722444 date of receipt or filed date and cann	(optional) ot be more than 90 days after
	nt is filed by the Florida Departn		•
date this docum			
	ent is filed by the Florida Departn		

Page 3 of 3

Filing Fee: \$25.00

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