

L09000105995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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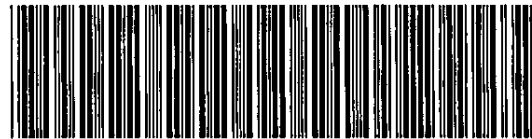
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(Business Entity Name)

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November 6, 2017

**Attorneys at Law**

Baton Rouge  
Birmingham  
Houston  
Jackson  
Memphis  
Mobile  
Nashville  
**New Orleans**  
Washington, DC

**Via U.S. Mail**

Florida Department of State  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**Emilie L. Pfister**  
(504) 585-1274  
E-Fax (504) 586-7949  
Emilie.pfister@arlaw.com

*Re: Articles of Amendment  
Pointe Mezzanine, LLC*

Dear Sir or Madam:

Attached are the executed Articles of Amendment to the Articles of Organization of Pointe Mezzanine, LLC, which we are filing on behalf of our client. Please process this filing and find enclosed a check for the \$25.00 filing fee.

If you have any questions or comments regarding the foregoing, please do not hesitate to contact my assistant, Jennifer Carroll, at (504) 585-0163.

Sincerely,

**ADAMS AND REESE LLP**

**Emilie L. Pfister**

ELP/jlc  
Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pointe Mezzanine, 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:

Mark S. Embree

\_\_\_\_\_  
Name of Person

Adams and Reese LLP

\_\_\_\_\_  
Firm/Company

701 Poydras Street

\_\_\_\_\_  
Address

New Orleans, Louisiana 70139

\_\_\_\_\_  
City/State and Zip Code

mark.embree@arlaw.com

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

For further information concerning this matter, please call:

Emilie L. Pfister

at ( 504 ) 585-0274

\_\_\_\_\_  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pointe Mezzanine, 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 November 3, 2009 and assigned  
Florida document number L09000105995.

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)**

1901 Manhattan Blvd.

Building H, Suite 101

Harvey, LA 70058

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1901 Manhattan Blvd.

Building H, Suite 101

Harvey, LA 70058

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**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:

Robert J. Guidry

New Registered Office Address:

10 Harbor Blvd., Unit W-525

*Enter Florida street address*

Destin

, Florida 32541

*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.*

*Robert J. Guidry*  
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	Charles W. Fuller	P.O. Box 28105	<input type="checkbox"/> Add
		Panama City Beach, FL 32411	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Robert J. Guidry	1901 Manhattan Blvd.	<input checked="" type="checkbox"/> Add
		Building H, Suite 101	<input type="checkbox"/> Remove
		Harvey, LA 70058	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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**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 November 16, 2017

~~Signature of a member or authorized representative of a member~~

Robert A. Guindon  
Typed or printed name of signee

Typed or printed name of signee