L10000018a31

(Re	equestor's Name)			
(Ac	ddress)			
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(Ci	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
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D. BRUCE

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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 20, 2011

BILL TOLLIVER NEWREALTY.COM 2800 MARINA MILE ROAD, SUITE 118 FT. LAUDERDALE, FL 33312-4812

SUBJECT: LINCOLN HOLDING & INVESTMENT, LLC

Ref. Number: L10000018231

We have received your document for LINCOLN HOLDING & INVESTMENT, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

Please return 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) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 511A00017168

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SECKETARY OF STATE
AND ANASSEF, FLORID.

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	LINCOLN HOLDI	NG & INVESTMENT, LL	.C		
	****	Name of Limited Liability Company			
•					
The enclosed Article	s of Amendment and fee(s) are su	bmitted for filing.			
Please return all corr	espondence concerning this matte	er to the following:			
		Bill Tolliver			
		Name of Person			
	NewRealty.com				
	Firm/Company				
	2800 MARINA MILE RD STE 118				
		Āø →			
	12	JUL 22 LAHASS			
		L22 TARY HASSE			
	E-mail address:	billt@NewRealty.com (to be used for future annual report notific	cation)	LUJ ~<	
For further information	on concerning this matter, please	•	·	⊅ ,, ~ r	
	-			© tu #29	
Bill Tolliver Name of Person		at (305) Area Code & Daytime	791-2330 Telephone Number		
Enclosed is a check f	or the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	tions ter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LINCOLN HO	DLDING 8	<u> INVESTME</u>	NT, LLC		
(<u>Name of the Limited Lia</u> (A Flo	<u>bility Compa</u> rida Limited I	ny as it now appear Liability Company)	rs on our records.		
The Articles of Organization for this Limited Liabil	were filed on	02/17/2010	and assigned	and assigned	
Florida document numberL1000001823	<u>1</u> .				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	limited liab	ility company her	<u>e</u> :		
		y.com, LLC			
The new name must be distinguishable and end with the "L.L.C."	e words "Limi	ted Liability Compa	ny," the designation	"LLC" or the abbrev	iatio
Enter new principal offices address, if applicable:		2800 MARIN	A MILE RD STE	118	
(Principal office address MUST BE A STREET ADDRESS)		FORT LAUDE	ERDALE FL 33	312 4812	
					1
				L 22 ARY	ma 44
Enter new mailing address, if applicable:		2800 MARINA			
(Mailing address MAY BE A POST OFFICE BOX)		FORT LAUDE	ERDALE FL 33	U14-72/12 -	
			· - · · · · · · · · · · · · · · · · · · ·	RIDERIDE	
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, <u>enter</u>	the name of the	<u>nev</u>
Name of New Registered Agent:					
New Registered Office Address: 26	2800 MARINA MILE RD STE 118				
		Ent	ter Florida street ac	ldress	
FORT		LAUDERDALE	, Florida _	33312	
		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 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> Address Type of Action MGRM William Tolliver 2800 MARINA MILE RD STE 118 FORT LAUDERDALE FL 33312-4812 ☐ Add Remove ___ Add Remove Remove ∐Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 18 Dated_ Signature of a member or authorized representative of a member Audra Sanborn

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00