Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000042198 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

т	`~	٠
1	v	٠

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BAND LAW GROUP, PL.

Account Number : 120090000020 Phone : (941)917-0505

: (941)917-0506 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

 4 3	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN $^{\circlearrowright}$ CHURCH AVENUE ASSOCIATES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

O SIMMONS

FEB 0 7 2020

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHURCH AVENUE ASSOCIATES, LLC (Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our recordibility Company)	I.)		
The Articles of Organization for this Limited Liability Company w	and assigned			
Florida document number L10000020861				
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited Babilly	ty company here:			
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC"	or the abbreviation "FAC."		
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)				
		U. Land		
nter new mailing address, if applicable:		72.5		
Mailing address MAY BE A POST OFFICE BOX)		<u></u> ω		
		<u> </u>		
 If amending the registered agent and/or registered office ad- gent and/or the new registered office address here: 	dress on our records, <u>enter (</u>	the name of the new registe		
Name of New Registered Agent:				
New Registered Office Address:				
	Enser Florida street address	•		
	 ,	rida		
	av	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.

1

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>	Name	Address	Type of Action
MGR	ANDREW EICHENBLATT	2893 WYNFAIR DRIVE	■Add
		MARIETTA, GEORGIA 30062	□Remove
			□ Change
			□ Add
			Remove 2022 Change Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			□ Change

							<u> </u>	•
								
								_
_		_						
								-
		-						-
·	·						202	
						<u>Z</u>	207	6.14
						.,,1		.en
					··· ·		: o	
				-		Fi ₂	PH 12: 43	
			· · · · · · · · · · · · · · · · · · ·			<u></u>		•
				<u> </u>			<u> </u>	-
								•
				···				•
·				•				•
		_						•
ffective date, if other than the da	te of filing	:			(01	otlonal)		
ffective date, if other than the da an effective date is listed, the data must be ote: If the date inserted in this block	specific and	cannot be pri	ior to date of	filing or more	than 90 days a	fler filing.) Pu this date wil	rmant to 605 I not be list	5.0207 ted as
ocument's effective date on the Department					,			
								.,
record specifies a delayed effective d l is filed.	ate, but not	an errective	itime, at 12	:VI s.m. on	the earmer or	(p) The Ar	un day ame	ruic
PRODUCTOR STATE		2020						
	,	2020	·					
ated								
ated		2 1	BA					