## L10 000024998

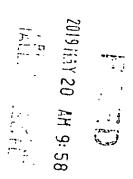
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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## **COVER LETTER**

	Registration Sec Division of Corp					
cim ir c		ies Pensacola, LLC				
SUBJEC	Name of Limited Liability Company					
The enclo	osed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspon	dence concerning this matter	to the following:			
		Kenneth G. Redding, Jr.				
			Name of Person			
		LAR Properties Pensacola,	rrc			
			Firm/Сотралу			
		437 Tampico Way				
			Address	<del> </del>		
		Pensacola, FL 32506				
		redding.kg@gmail.com	City/State and Zip Code			
		E-mail address: (	to be used for future annual report notifi	cation)		
For furth	er information co	ncerning this matter, please ca	all:			
Kenneth	G. Redding, Jr.		850 341-9283			
	Name of	Person		Telephone Number		
Enclosed	l is a check for the	e following amount:				
<b>□ \$</b> 25.0	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:** 

TO:

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

LAR Properties Pensacola, LLC

2019 HAY 20 AH 9: 58

02/19/2010 and assigned  ere:  designation "LLC" or the abbreviation "L.L.C."
designation "LLC" or the abbreviation "L.L.C."
our records, <u>enter the name of the r</u>
rida street address
, Florida 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.

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>	Type of Action
MGRM	Stacy S. Workman	5090 Stacy Street West Palm Beach, FL 33417	Add
			Remove
			☐ Change
MGRM	Terry Workman	18648 50th St. N. Loxahatchee, FL 33470	
			☐ Remove
			☐ Change
<del>.</del>			□ Add
			☐ Remove
			Change
-1			□ Add
			☐ Remove
			☐ Change
			Add
			_ □ Remove
			Change
			Add
			☐ Remove
			Change

	mendment pursuant to ORDER OF SUMMARY ADMINISTRATION filed 05/01/2019
	THE CIRCUIT COURT FOR PALM BEACH COUNTY, FLORIDA.
-	ROBATE DIVISION IN RE: ESTATE OF SUZANNE WORKMAN, Deceased.
_	ILE NO. 50-2019-CP-001495-XXXX-MB Division IB.
<u></u>	
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n effe I <b>te:</b>	ve date, if other than the date of filing: 05/01/2019 (optional) ective 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 605.02 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
ted _	May 15 2019
	Signature of a member produthorized representative of a member
	Kenneth G. Redding, Jr.  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00