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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : THE FARR LAW FIRM

Account Number: 103654001666 Phone: (941)639-1158

Fax Number : (941)639-0028

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

Email Address: Kblack & farr. com

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KINGSWAY CIRCLE, LLC

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K SALY DEC 28 2017

### **COVER LETTER**

	tration Sect on of Corpo			
	INGSWAY	CIRCLE, LLC		
SUBJECT: _		Name of Limit	ed Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subm	itted for filing.	
		dence concerning this matter to		
		David A. Holmes, Esq.		
			Name of Person	
		Farr, Farr, Emerich, Hacket	t, Carr and Holmes, P.A.	
			Firm/Company	
		99 Nesbit Street		
			Address	<del>-</del>
		Punta Gorda, FL 33950	_	
			City/State and Zip Code	
		kblack@farr.com; dholmes@	o be used for future annual report no	(Festion)
				(III/CBJ\/II/
For further in	formation co	ncerning this matter, please ca	11:	
David Holme	9		941 505-9975 at ()	
	Name of	Person	Area Code Doyti	me Telephone Number
Enclosed is a	check for th	e following amount:		
■ S25.00 Fi		S30.00 Filing Fcc & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is eschaed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ussee, FL 32314	STREET/COUR Registration Section of Corp Clifton Building 2661 Executive	orations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT

#### TO ARTICLES OF ORGANIZATION OF

FILED

2017 DEC 27 AM 10: 01

SECRETARY OF STATE
TALLAHASSEE, FLORID

KINGSWAY CIRCLE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Florida Limited	d Liability Cempany)	
The Articles of Organization for this Limited Liability Compan	ny were filed on 09/28/20	and assigned
Florida document number L10000100946		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET ADDRESS)	·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address b	office address on our pere:	records, enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	rees address
		, Florida
<del></del>	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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

### H 170003386343

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>	Address	Type of Action
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		NORTH PORT, FL 34287	□ Remove
			☐ Change
			Remove
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coment 2 effective date off me De	partificition State 5 fee			
record specifies a delayed The 90th day after the rec	effective date, bu ord is filed.	it not an effective	tlme, at 12:01 a	i.m. on the earlier ol
December 27	2017			
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$\overline{}$	Signature of a member of	r authorized representar	AE OL B MEMOEL	

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