

LI1000000 6186

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

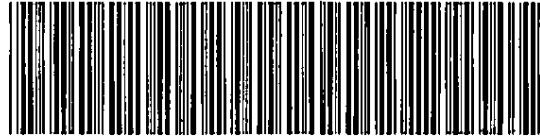
(Business Entity Name)

(Document Number)

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2019 AUG 14 AM 11:19

FILED

C. GOLDEN

AUG 23 2019

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** BROWARD CAPITAL INVESTORS, 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:

LINDA WILLIAMS

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

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

1845 CORDOVA ROAD, SUITE 215

\_\_\_\_\_  
Address

FORT LAUDERDALE, FL 33316

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

LINDA@FIRSTLAUDERDALE.COM

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

For further information concerning this matter, please call:

LINDA WILLIAMS

954

522-4500 EXT 122

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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**

**FILED**

2019 AUG 14 AM 11:19

BROWARD CAPITAL INVESTORS, 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 01/13/2011 and assigned  
Florida document number LI1000006186

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)**

1845 CORDOVA ROAD

SUITE 215

FORT LAUDERDALE, FL 33316

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

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

1845 CORDOVA ROAD

SUITE 215

FORT LAUDERDALE, FL 33316

**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:

Florida Land Investor's, INC

New Registered Office Address:

1845 CORDOVA ROAD SUITE 215

*Enter Florida street address*

FORT LAUDERDALE

*City*

Florida

33316

*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>	<u>Type of Action</u>
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

This image shows a blank sheet of white paper with horizontal blue or grey ruling lines. There are three vertical lines on the right side of the page, creating a margin. The top of the page has some faint, illegible markings, possibly from a previous page or a header. The rest of the page is empty except for the lines.

**F. 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

AUGUST 12th

2019

GUST 12th \_\_\_\_\_ 2019

 \_\_\_\_\_

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

JOHN T. LOOS, JR

Typed or printed name of signee