

4/26/2016

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Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
APOSTLE'S OAK, LLC

Certificate of Status	0
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APR 27 2016

J SHIVLER
Help

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

APOSTLE'S OAK, 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 04/20/2011 and assigned Florida document number L11000047621

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:

13180 SOUTHFIELDS RD

(Principal office address MUST BE A STREET ADDRESS)

WEST PALM BEACH, FL 33414

Enter new mailing address, if applicable:

13180 SOUTHFIELDS RD

(Mailing address MAY BE A POST OFFICE BOX)

WEST PALM BEACH, FL 33414

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:

MICHAEL T GALVAN

New Registered Office Address:

13180 SOUTHFIELDS RD

Enter Florida street address

WEST PALM BEACH

Florida

City

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FLORIDA
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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.

Michael Galvan

If Changing Registered Agent, Signature of New Registered Agent

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ARTICLE II- Address: The mailing address and street address of the principal office of the Limited Liability

Company is: CHANGE "Principal office address" to: 13180 Southfields Road, West Palm Beach, FL 33414

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: CHANGE "The name and

the Florida street address of the registered agent" to: Michael T Galvan, 13180 Southfields Road,

West Palm Beach, FL 33414

ARTICLE IV: Manager(s) or Managing Member(s): The name and address of each Manager or

Managing Member is as follows: CHANGE "Title" to: AMBR and CHANGE "Name and Address" to:

13180 Southfields Road, West Palm Beach, FL 33414

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E. 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 4-26-14

Michael Galvan
Signature of a member or authorized representative of a member

MICHAEL T GALVAN

Typed or printed name of signee

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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>
MGR	BARBARA ANN BATES	8901 KENDALE PLACE	<input type="checkbox"/> Add
		LAKE WORTH, FL 33467	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MICHAEL T GALVAN	13180 SOUTHFIELDS RD	<input checked="" type="checkbox"/> Add
		WEST PALM BEACH, FL 33414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 15 APR 2016 11:08 AM
 ADD REMOVE CHANGE ADD

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