

L11000 100622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

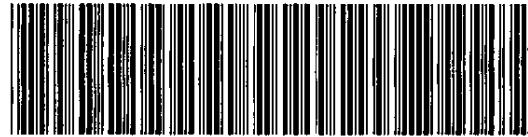
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800212574908

10/03/11--01027--013 **25.00

FILED
11 OCT -3 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan OCT -3 2011

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Cheltenham Bay Group 1, 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:

DOROTHY A. MAHFOOD

Name of Person

Firm/Company

18770 SW 7 STREET

Address

PEMBROKE PINES, FL 33029

City/State and Zip Code

dkmahfood@hotmail.com

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

For further information concerning this matter, please call:

DOROTHY A. MAHFOOD

Name of Person

at (954) 292-3684

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

Chelthenham Bay Group 1, LLC

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

FILED
11 OCT -3 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on September 1, 2011 and assigned
Florida document number L11000100622.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

18770 SW 7 STREET

(Principal office address MUST BE A STREET ADDRESS)

PEMBROKE PINES, FLORIDA 33029

Enter new mailing address, if applicable:

18770 SW 7 STREET

(Mailing address MAY BE A POST OFFICE BOX)

PEMBROKE PINES, FLORIDA 33029

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:

DOROTHY A. MAHFOOD

New Registered Office Address:

18770 SW 7 STREET

Enter Florida street address

PEMBROKE PINES

, Florida

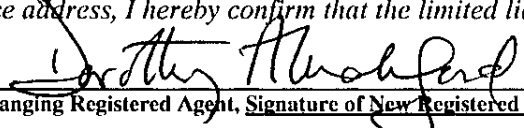
33029

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 608, 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

MGR = Manager
MGRM = Managing Member

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

Sept. 27, 2011

Dorothy A. Mahfood

Page 2 of 2

Filing Fee: \$25.00

FILED
11 OCT -3 PM 3:50
SECOND JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA