

L11000101166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

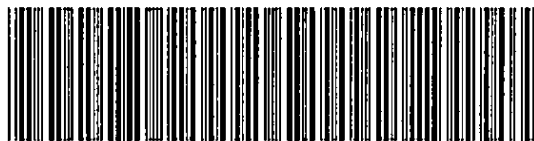
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/21/21 --01021--014 ++30.00

SEP 21 PM 4:18

flc

Mary Ann Williams

Calhoun Investments Limited Liability Company (LLC)

1519 Terrace Green Drive
Leesburg, FL 34748
407-509-9150
Wayne@Alliancegig.com

September 02, 2021

Division of Corporations

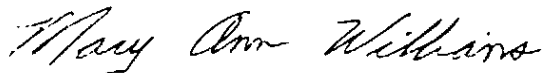
Registration Section
Florida Department of State Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Division of Corporations:

This cover letter is to confirm the request to change the registered agent's name and address per the enclosed documents.

If you have any questions, please give me a call 407-509-9150.

Sincerely,

A handwritten signature in cursive script that reads "Mary Ann Williams".

Mary Ann Williams
Enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Calhoun Investments, 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:

MARY ANN WILLIAMS
Name of Person

Calhoun Investments, LLC
Firm/Company

1519 Terrace Green Dr.
Address

Leesburg, FL 34748
City/State and Zip Code

WAYNE@ALLIANCEGIG.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WAYNE EASTERLING at (407) 509-9150
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Calhoun Investments 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 09/02/2011 and assigned Florida document number L11000101166.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

HORACE WAYNE EASTERLING

New Registered Office Address:

1519 Terrace Green Dr.

Enter Florida street address

Leesburg

City

Florida 34748

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.

Mary Ann Wilkins

If Changing Registered Agent, Signature of New Registered Agent

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TO
ARTICLES OF ORGANIZATION
OF**

Calhoun Investments, LLC

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(A Florida Limited Liability Company)

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Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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Name of New Registered Agent:

HORACE WAYNE EASTERLING

New Registered Office Address:

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Enter Florida street address

Leesburg

City

Florida

34748

Zip Code

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HORACE WAYNE EASTERLING
If Changing Registered Agent, Signature of New Registered Agent

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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SEP 21 PM 4:18

SEP 21 PM 11:18

(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)

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 8/26/2021.

Mary Ann Williams
Signature of a member or authorized rep.

Signature of a member or authorized representative of a member

Mary Ann Williams

Typed or printed name of signee