

L11000/24/17

(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



500289577235

08/29/16--01036--015 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 AUG 29 PM 2:58

FILED

K. SALY
EXAMINER
AUG 30

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ORCHARD APPLE HOLDINGS, 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:

SCOTT R. JABLONSKI, ESQ.

Name of Person

CORRIDOR LEGAL LAWYER, PLLC

Firm/Company

2903 W. NEW HAVEN AVE. #462

Address

MELBOURNE, FL 32904

City/State and Zip Code

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

For further information concerning this matter, please call:

SCOTT R. JABLONSKI

321 222-0930
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

ORCHARD APPLE HOLDINGS, LLC

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

FILED
2016 AUG 29 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 11/01/2011 and assigned
Florida document number L11000124117.

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:

2903 W. New Haven Ave.

(Principal office address MUST BE A STREET ADDRESS)

#462

Melbourne, FL 32904

Enter new mailing address, if applicable:

2903 W. New Haven Ave.

(Mailing address MAY BE A POST OFFICE BOX)

#462

Melbourne, FL 32904

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:

Scott R. Jablonski, Esq.

New Registered Office Address:

2903 W. New Haven Ave. #462

Enter Florida street address

Melbourne

City

Florida 32904

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>
AMBR	Scott R. Jablonski	2903 W. New Haven Ave.	<input type="checkbox"/> Add
		#462	<input type="checkbox"/> Remove
		Melbourne, FL 32904	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2018 AUG 29 PM 8:59
 RECEIVED
 TALLAHASSEE
 OFFICE OF THE
 CLERK OF THE
 SUPERIOR COURT

FILED


2016 AUG -
OFFICE OF
CLERK OF
FLORIDA

FILED
2016 AUG 29 PM 2:59
CLERK OF DISTRICT COURT
HALL COUNTY FLORIDA

(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)

(b) The 90th day after the record is filed.

Dated August 23 2016

 Signature

Signature of a member or authorized representative of a member

Scott R. Jablonski

Typed or printed name of signee