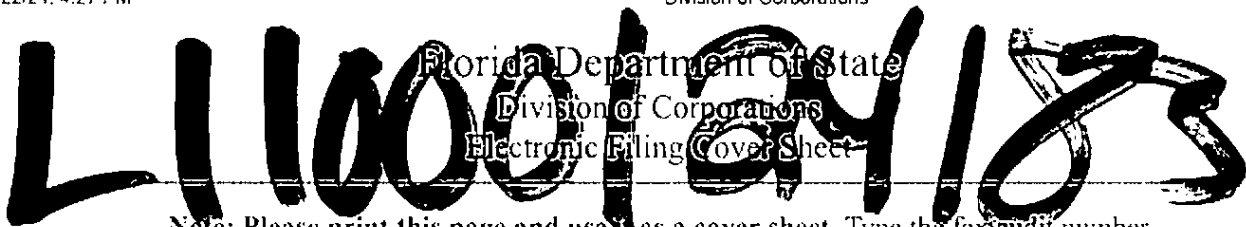


9/22/21, 4:27 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax/audit number (shown below) on the top and bottom of all pages of the document.

((H21000356121 3)))



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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : ROGERS, TOWERS, BAILEY, ET AL  
Account Number : 07666602273  
Phone : (904)398-3911  
Fax Number : (904)396-0663

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

Email Address: jcassell@rtlaw.com

2021 SEP 22 03:41

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

21 SEP 22 AM 11:52  
FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
13198 VILLAGE LAKE CIRCLE LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Handwritten signature and date: TC 9/23/21

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

H21000356121 3

**SUBJECT:** 13198 VILLAGE LAKE CIRCLE 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:

Christine Adams

Name of Person

Rogers Towers, P.A.

Firm/Company

1300 Riverplace Blvd, Suite 1500

Address

Jacksonville, FL 32207

City/State and Zip Code

cadams@rtlaw.com

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

For further information concerning this matter, please call:

Christine Adams

904 346-5546

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 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

H21000356121 3

13198 VILLAGE LAKE CIRCLE 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 11/01/2011 and assigned Florida document number L11000124183

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

13918 Village Lake Circle, L.L.C.

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:

New Registered Office Address:

Enter Florida street address

City

Florida

Code

21 SEP 22 AM 11:14  
FILED  
STATE OF FLORIDA

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

H21000356121 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

H21000356121 3

MGR = Manager  
AMBR = Authorized Member

<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
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

