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EXAMINER

COVER LETTER

TO: Registration Section Oivision of Corporations
SUBJECT: FOX 212 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:
BRUCE TUCKER Name of Person
FOX 212 LLC
Firm/Company
2050 W. Palmetto PKRd #279
Boca Raton Florida 33433 City/State and Zip Code Lychard Beaol. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lydia Andrews at 501789-2405 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Certified Copy} \text{(additional copy is enclosed)} \text{\$\frac{1}{2}} \frac{1}{2} \text{\$\frac{1}{2}} \frac{1}{2} \text{\$\frac{1}{2}} \$\frac{

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

Fox 2	12 LLC	•
(<u>Name of the Limited Liabi</u> (A Florid	ility Company as it now appears o da Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability	y Company were filed on	4/2012 and assigned
Florida document number 4/20000/	<u>649</u>	
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and end with the v"L.L.C."	words "Limited Liability Company,	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
		\$0 B
		The state of the s
Enter new mailing address, if applicable:		37 (1)
(Mailing address MAY BE A POST OFFICE BOX)		THE
·	.	<u> </u>
B. If amending the registered agent and/or regregistered agent and/or the new registered office a		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
Trest tregistered Office Plantess.	Enter	Florida street address
	, Florida	
_	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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Type of Action Title** <u>Address</u> Name 1 ☐ Add Remove ☐ Add ☐ Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.);

Typed or printed name of signee

Page 2 of 2

Signature of a member or authorized representative of a member

Filing Fee: \$25.00