## L120000 14751

(Requestor's Name)				
(Address)				
(Address)	_			
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	_			
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12 AUG 30 AH 11: 44

AUG 3 1 2012 T. **HAMPTON** 

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:	501:	3 Sligh LLC			
Name of Limited Liability Company					
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
		Chip Gates			
	Name of Person				
	Avesta				
	Firm/Company 5118 N. 56th St.				
	Address				
	Tampa, FL 33610 City/State and Zip Code				
	cga	tes@avestahomes.com to be used for future annual report r			
P 64 '- 6			offication)		
For turner information	concerning this matter, please of	zaii:			
	Chip Gates	at ( 813 ) Area Code & Da	444-1522		
Name	of Person	Area Code & Day	ytime 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/COU Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations ng e Center Circle		

## ARTICLES OF AMENDMENT TO FILEO ARTICLES OF ORGANIZATIONS OF CORPORATIONS

OF 12 AUG 30 AM II: 44

(Name of the Print	5013 Sligh LLC		
(Name of the Limited Line) (A Flor	oility Company as it now apperida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liabili	ty Company were filed on	1/31/2012 and assigned	
Florida document numberL12000014751	<u>.                                    </u>		
This amendment is submitted to amend the followin	g:		
A. If amending name, enter the new name of the	limited liability company ho	<u>ere</u> :	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	pany," the designation "LLC" or the abbreviatio	
Enter new principal offices address, if applicable	<u> </u>		
(Principal office address MUST BE A STREET A)	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
	<del></del>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the name of the new	
Name of New Registered Agent:		78	
New Registered Office Address:			
	Enter Florida street address		
_	City	, Florida 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

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 **Name Address** Integritas Residential LLC MGR 5118 N. 56th St. . ☐ Add ✓ Remove Tampa, FL 33610 MGR 5118 N. 56th St. ✓ Add Remove Tampa, FL 33610 ☐ Add Remove Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 70 Signature of a member or authorized representative of a member Nathaniel Fischer Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00