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(Re	questor's Name)	
(Ad	dress)	
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COVER LETTER

SUDJECT.		mmunity Development			
Name of Limited Liability Company					
The enclosed	d Articles of	Amendment and fee(s) are submitted for filing.			
Please return	all correspon	ondence concerning this matter to the following:			
		Richard Hicks			
		Name of Person			
		Basilia Community Develpment LLC			
		Firm/Company			
		13900 CR 455 Suite 107-403			
	· Address				
		Clermont, Fl 34711			
		City/State and Zip Code	_		
		svdbygrce@aol.com	_		
		E-mail address: (to be used for future annual report notification)			
For further in	nformation co	concerning this matter, please call:			
Richard Hick	ks	407 718-0908 at ()			
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: Richard Hicks Name of Person Basilia Community Development LLC Firm/Company 13900 CR 455 Suite 107-403 Address Clermont, Fl 34711 City/State and Zip Code svdbygrce@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:					
Enclosed is a	check for the	he following amount:			
□ \$25.00 F	iling Fee	Certificate of Status Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status	cate of Status & ed Copy		

MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

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

Basilia Community Development LLC		•
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on ou Liability Company)	r records.)
The Articles of Organization for this Limited Liability Company Florida document number 1200144980		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
Cypress Inlet, LLC		<u>. 0</u>
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designati	on "LLC" or the abbreviation LLC
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	same	SSS -6
	1 10 41 10 10	
		2: STAI
Enter new mailing address, if applicable:	same	15 TIGHT 15
Mailing address MAY BE A POST OFFICE BOX)		***************************************
Manage undress MAT DE ATOST OFFICE BOA		
3. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		records, <u>enter the name of the n</u>
New Registered Office Address:		
New Registered Office Address.	Enter Florida stre	et address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete		

If Changing Registered Agent, Signature of New Registered Agent

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 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>	Address	Type of Action
MGR	John Kordon	8909 Bristol Bend Fort Myers, Fl 3	■ Add
			□ Remove
			☐ Change
			□ Add
			Remove
			Change
			Add
			Remove
			☐ Change
			
		100 W (100 W 100 W	□ Remove
			Change 5 JUHANUL 1311 AH
			FILLED F COOPER FARY FARY FARY FOR COOPER FOR CO
			FIGRICA STATE FLORIDA
· · · · · · · · · · · · · · · · · · ·			Add
			□ Remove
			☐ Change

If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	•
(If an e Note	tive date, if other than the date of filing:
he re Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
Dete	1 06/30/2015 - OFICE TAPASS - OFICE
Date	SEE PR
	Signature of a member or authorized representative of a member
	Richard Hicks

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00