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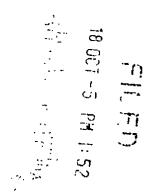
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COVER LETTER

Division of Corporations
SUBJECT: INdian HILL INVESTMENTS 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:
MARY JOE MOORE Name of Person
INDICAN HILL INVESTMENTS LLC Firm/Company
55 INLET POINT BLUD
PONCE INLET FLORIDA 32127 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
NIPRY JOE M WOF12 at (386) 304 - 8528 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
▼ 525 00 Filing Fee

MAILING ADDRESS:

Registration Section

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahussee, F1, 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

Tudian

company has been notified in writing of this change.

TAI CLAN HOLL TAY VEST MENT (Name of the Limited Liability Company as it now (A Florida Limited Liability Con	appears on our records.)		
The Articles of Organization for this Limited Liability Company were filed Florida document number <u>LJ2W0149603</u>	i on <u>NOVENBER</u>	agreed	اریکا and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability comp	pany here:		
The new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "LLC" or (the abbreviat	ion "L I. C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	; ;	<u> </u>	
		:: OC 1	`` Y ``
	:	ر. ا	in-marin.
Enter new mailing address, if applicable:		; - 0	: 17
Mailing address MAY BE A POST OFFICE BOX)			-
		52	
	(7)		
 If amending the registered agent and/or registered office addressing segment and/or the new registered office address here: 	ess on our records, <u>en</u>	iter the n	ame of the
Name of New Registered Agent:			
New Registered Office Address:			
$-\frac{1}{E}$	ster Florida street address		
	, Florida	l	
City		Zip	Code

If Changing Registered Agent, Signature of New Registered Agent

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply wi provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with una accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

MGR = M $AMBR = A$	lanager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
MQR	MADELINE WINTER	POWCE I APLET, FL 32/	□ Add 2 7 □ Kemove
. '. '. O. O.			Change
M-G-R-	HEATH MOORE	PORCE INLET, PL 32/2	
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D. If amending any other information, enter change(s) here: (Attach additional	sheets, if necessa	ny.)	
			
			
			
			
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E. E. C.		53	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing required of Statistics and cannot be prior to date of filing or more than document's effective date on the Department of Statistics and date of filing requirements.	(optional) 90 days after filing.)	Pursuan	ι το 605.0207
document's effective date on the Department of State's records.	rements, this date i	ton Hrv	be listed as t
f the record specifies a delayed effective date, but not an effective time, a b) The 90th day after the record is filed.	nt 12:01 a.m. c	n the	earlier of:
Dated			
Signature of a member or authorized representative of a mer	uber		
Toe Sloov = Typed or printed name of signee	nivel	· !· ,	

Page 3 of 3

Filing Fee: \$25.00