## L13 0000 17945

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





700287671207

07/12/16--01009--013 \*\*25.00

J. HARRIS

## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:	910 CAPE 0	CORAL PARKWAY, LLC		
SOBJECT.		Name of Limit	ed Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return	all correspor	ndence concerning this matter t	o the following:	
		Trevor Burgess		
			Name of Person	
		C1 Bank		
		**************************************	Firm/Company	
		100 5th Street South		
			Address	
		Saint Petersburg, FL 3370	1	
			City/State and Zip Code	
		trevor.burgess@clbank.com		
		E-mail address: (t	o be used for future annual report	notification)
For further is	nformation co	oncerning this matter, please ca	all:	
Trevor Burg	gess		727 892-309- at ()	
	Name of	f Person	Area Code Da	ytime Telephone Number
Enclosed is	a check for th	e following amount:		
\$25.00 1	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:

TO:

Registration Section

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

910 CAPE CORAL PARKWAY, LLC			
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our nited Liability Company)	records.)	
The Articles of Organization for this Limited Liability Composition of Composition (Composition of Composition	pany were filed on February 5	, 2013	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company here:		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation	on "LLC" or the abbre	
Enter new principal offices address, if applicable:		100	() (
Principal office address MUST BE A STREET ADDRES	(S)	T.	<u> 23</u>
		.0.75 .0.75	<del></del> ,
		The .	R [1]
1. (		77 (2)	rs CJ
Enter new mailing address, if applicable:			2
Mailing address MAY BE A POST OFFICE BOX)		<u>0m</u>	
3. If amending the registered agent and/or register egistered agent and/or the new registered office addres		ecords, enter th	e name of the
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stree	et address	
		. Florida	
	City	, FIOLIUA	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 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

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	William H. Sedgeman, Jr.	100 5th Street South	
		Saint Petersburg, FL 33701	Remove
			☐ Change
MGR	Clark T. Higgs	100 5th Street South	Add
		Saint Petersburg, FL 33701	Remove
			Change
MGR Trevor Bu	Trevor Burgess	100 5th Street South	Add
		Saint Petersburg, FL 33701	■ Remove
			☐ Change
MGR	Cl Bank	100 5th Street South	B Add
		Saint Petersburg, FL 33701	Remove
			☐ Change
			Add
		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	Remove
			Change
			©rn — ☐ Remove
			□ Change

	any otner info	rmation, en	ter change(	(s) here: <i>(A</i>	ttach additi	onal sheets	i, if neces	sary.)	
•			_			<del></del>			
	,	·	·		- · · · · · · · · · · · · · · · · · · ·			-	
								<u>-</u>	
				<del> </del>					
		·							
<del></del>						<u>u</u>			
<del>,,</del>	····					<del></del>			
			<u> </u>	<del>-</del>	<del></del>		<del>-</del> ··		· ·
							,		
n effective di	e, if other tha	ate must be spec	cific and canno	ot be prior to de	ate of filing or	more than 90	(optio days after nents, this	filing.) Pu	rsuant to
	ffective date on				statutory min	ng requiren	ieno, ano	date with	i noi oc
	pecifies a de			but not a	n effective	time, at	12:01 a	.m. on	the ea
	day after the	e record is	nied.						
The 90th	day after the	e record is		16					
he 90th	day after th	e record is	7) 201	16				l'Al	<i>L</i>
he 90th	day after th	e record is						SECHI	Ö
he 90th	day after th		20:		d representati	ve of a memb	er	SECAL TAN	70 4
The 90th  ted July 7	day after the	Signate	20:	er or authorize		`		33	=

Page 3 of 3

Filing Fee: \$25.00