# L13000043558

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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13 APR 24 PN 3: 31

SECRETARY OF STATE
SHIP AHASSEE, FLORIDA

04/15/13--01039--007 \*\*55.00

C. LEWIS

APR 25 2013

EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2013

CRAIG B. SHERMAN / SHERMAN & SHERMAN, PA 2000 GLADES ROAD SUITE 204 BOCA RATON, FL 33431

SUBJECT: SOUTHPORCH INVESTMENTS, LLC

Ref. Number: L13000043558

We have received your document for SOUTHPORCH INVESTMENTS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 813A00009083

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

### COVER LETTER

TO:

**Registration Section Division of Corporations** 

# SOUTHPORCH 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:

Craig B. Sherman

Name of Person

Sherman & Sherman, P.A.

Firm/Company

2000 Glades Road, Suite 204

Address

Boca Raton, FL 33431

City/State and Zip Code

craig@shemanslaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Craig B. Sherman

at (561) 300-5888 ext. 207

Area Code & Daytime Telephone Number

Name of Person

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/COURIER ADDRESS:

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

# ARTICLES OF AMENDMENT 'TO ARTICLES OF ORGANIZATION **OF**

FILED

13 APR 24 PM 3: 31

SOUTHPORCH IN	IVESTMENTS.	LLC
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(Name of the Limited Liability Company as it now appears on our records) AHASSEE, FLORIDA

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia Florida document number L13000043558	bility Company v	were filed on <u>3/22/13</u>	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liabil	lity company here:	
The new name must be distinguishable and end with 'L.L.C."	the words "Limite	ed Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	609 Grove Court	
Principal office address MUST BE A STREET		Maitland, Florida 327	51
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		609 Grove Court Maitland, Florida 32751	
B. If amending the registered agent and/or registered agent and/or the new registered offi		:	s, <u>enter the name of the new</u>
Name of New Registered Agent:			
New Registered Office Address:	609 Grove C		
			street address
	Maitland	, I	Torida 32751
		City	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:		

# 1

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.

Page 1 of 3

hanging 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 = Ma MGRM = N	nager Ianaging Member	FILED	
<u>Title</u> MGRM	Name Michael Zindman	Address 13 APR 24 PM 3: 31  2419 NVALADOME CIME	Type of Action
		Boca Raton, FL 33431	Add Remove
MGR	JACQUELINE P. LACHANCE	609 Grove Court	Add
		Maitland, FL 32751	Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove

	FILED
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	TALLAHASSEE, FLORIDA
Dated	Y Way Blumon Att Man as low of a Member of signee  Typed or printed name of signee  Page 3 of 3

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