L/3000069295

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COVER LETTER

TO: Registration Section
Division of Corporations

IRIECT. APALACH SAND BAR, 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:

Katherine Evans

Name of Person

Garcia & Associates, LLC

Firm/Company

565 Research Drive

Address

Athens, GA 30605

City/State and Zip Code

captbhuff@gmail.com

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

For further information concerning this matter, please call:

Katherine Evans

706_,548-1128

Name of Person

Area Code & Daytime 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Apalach Sand Bar, LLC			
(Name of the Limite	d Liability Company as it now A Florida Limited Liability Con	appears on our records.	
The Articles of Organization for this Limited I Florida document number L13000069295	Liability Company were filed		and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability compa	any here:	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability	Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		Ante 2
			± m
			26
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		2 2
· · · · · · · · · · · · · · · · · · ·			
			
B. If amending the registered agent and registered agent and/or the new registered of	or registered office addres	ss on our records, <u>ent</u> e	er the name of the new
Name of New Registered Agent:	Robert O. Huff, Jr.	*	
New Registered Office Address:	1820 Sunset Drive		
	-	Enter Florida street	address
	St. George Island	, Florida	32328
	City	, 1 101144	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.

*Name correction

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Robert O. Huff, Jr	1820 Sunset Drive	Add
		St. George Island, FL	Remove
		32328	* name Correction only
			DAdd
			Remove
			Add
			
			Add
			Remove
		<u></u>	Add
			Remove
			<u> </u>
			Add

and Managing	Member's name only from Robe	rt D. Huff, Jr
to Robert O. I	Huff, Jr. ***	
sune à	2013	
	//2/	
	Signature of a member or authorized representative of a m	ember
Gregory A. @	Sarcia, Attorney-in-Fact	<u></u>
	Typed or printed name of signee	
	Page 3 of 3	79.3
	Filing Fee: \$25.00	3 JUL
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