# LBW08843

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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

EBC 4802 Chester, 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:

Jeff Stultz

Name of Person

Estero Bay Capital, LLC

Firm/Company

5276 Summerlin Commons Wy #701

Address

Ft. Myers, FL 33907

City/State and Zip Code

jeff.stultz@esterobaycapital.com

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

For further information concerning this matter, please call:

Jeff Stultz

\_\_\_239\590-3033

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

EBC 4802 Chester, LLC				
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on o a Limited Liability Company)	ur records.)		
The Articles of Organization for this Limited Liability C Florida document number L13000088443	Company were filed on <u>06/19/</u>	2013	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	nited liability company here:			
The new name must be distinguishable and end with the words "Li	imited Liability Company," the design	ation "LLC" or the abbrev	iation "L.L.C."	_
Enter new principal offices address, if applicable:				_
(Principal office address MUST BE A STREET ADDI	RESS)		7.	
		* F	: 2	_
		.≫ ⊘		_
Enter new meiling address if applicables		(1) (1) (1)	<u> </u>	
Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE BOX)				_
	<del></del>		*	_
B. If amending the registered agent and/or registered agent and/or the new registered office add		records, enter the	name of the	nev
Name of New Registered Agent:	<del></del>			_
New Registered Office Address:				_
	Enter Florida str	reet address		
		, Florida		_
	City	Z	ip 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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address Type of Action
MMBR	Estero Bay Capital, LLC	5276 Summerlin Commons Wy #701
		Ft. Myers, FL 33907
MMBR	Shadow Development, LLC	12840 UNIVERSITY DR
		Ft. Myers, FL 33907
MGR Estero Bay Capital, LLC	5276 Summerlin Commons Wy #701	
		Ft. Myers, FL 33907
		Add Remove
		Add Remove

, ii aiiici	dung any other information, enter change(s) here: (Anach additional sheets, if necessary.)
	<del></del>
_	
the date	ve date, if other than the date of filing:  (optional)  tive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after this document is filed by the Florida Department of State)
Dated _	August 12, 2014
	0551-0
	Jeff Stultz
	Typed or printed name of signee

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Filing Fee: \$25.00