

L13000101281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

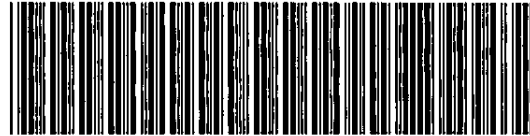
(Business Entity Name)

(Document Number)

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2014 OCT 23 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Gungor OCT 24 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SH Tampa Investments, LLC

SUBJECT: _____
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:

Bowen A. Arnold

Name of Person

DDA Development Company, Inc.

Firm/Company

1215 N Franklin Street

Address

Tampa, FL 33602

City/State and Zip Code

barnold@ddadevelopment.com

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

For further information concerning this matter, please call:

Bowen A. Arnold

239

849-7443

at (_____) _____

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

**TO
ARTICLES OF ORGANIZATION
OF**

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2014 OCT 23 PM 12: 31

SH Tampa Investments, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on March 4th, 2014 and assigned
Florida document number L13000101281.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1215 N Franklin Street

(Principal office address MUST BE A STREET ADDRESS)

Tampa, FL 33602

Enter new mailing address, if applicable:

1215 N Franklin Street

(Mailing address MAY BE A POST OFFICE BOX)

Tampa, FL 33602

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Bowen A. Arnold, Esq.

New Registered Office Address:

1215 N Franklin Street

Enter Florida street address

Tampa

Florida 33602

City

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

Authorized Member being added or removed from our records:

MGR = Manager

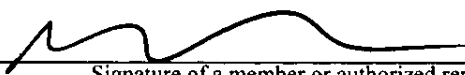
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Bowen A. Arnold	1215 N Franklin Street	<input checked="" type="checkbox"/> Add
		Tampa, FL 33602	<input type="checkbox"/> Remove
MGRM	Todd L. Borck	2430 Via Sienna	<input type="checkbox"/> Add
		Winter Park, FL 32789	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
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E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated Oct 23rd, 2014.



Signature of a member or authorized representative of a member

Bowen A. Arnold

Typed or printed name of signee

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Filing Fee: \$25.00

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