# 13000117769

(Requestor's Name)	
(Address)	500297
(Address)	000201
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	04/06/17
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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# **COVER LETTER**

TO:	Registration Se Division of Cor			
	Lands End	103, LLC		
SUBJE	CT:	Name of Lim	nited Liability Company	<del></del>
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Mr. Brian Brown		
			Name of Person	<del></del>
		BBB Holdings/Brian Brow	vn	
			Firm/Company	
		P.O. Box 404		
			Address	
		Mandeville, LA 70470		
		phint1729@gmail.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report n	otification)
For furth	ner information c	oncerning this matter, please ca	all:	
Mr. Bria	ın Brown		985 966-6181 at ()	
	Name o	f Person	Area Code Day	time Telephone Number
Enclosed	d is a check for th	he 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

Lands End 103, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_ and assigned Florida document number L13000117769 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NA The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Same Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Same Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: NA Name of New Registered Agent: NA New Registered Office Address: Enter Florida street address

## 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.

NA

If Changing Registered Agent, Signature of New Registered Agent

Florida

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

**AMBR** = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MAB Holdings, LLC	1720 Dupard St.	□ Add
		Mandeville, LA 70448	
			■ Remove
		·	☐ Change
MGR	BBB Holdings, LLC	1720 Dupard St.	
		Mandeville, LA 70448	
		<del></del>	Remove
			☐ Change
AMBR	Dale Bertucci	3910 Marquette St.	<b>=</b> Add
		Mandeville, LA 70471	
			□ Remove
			Change
AMBR	Affordable Homes	767 Labarre St.	Add
		Mandeville, LA 70448	■ Remove
			Remove
			☐ Change
			Add
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			Add
			□ Remove
			Change

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fective date, if other	u than tha data	Mar	ch 31, 2017		(0)	ntional)	
an effective date is listed,	the date must be sp	ecific and cannot			ore than 90 days a		
ote: If the date inserte ocument's effective date				statutory filin	g requirements,	this date will no	ot be listed a
e record specifies a The 90th day afte			out not ar	effective t	ime, at 12:0	1 a.m. on th	e earlier
March 31		3017	7				
ated							

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Typed or printed name of signee

Filing Fee: \$25.00