# L 13000164900

(Requestor's	s Name)
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### **COVER LETTER**

TO:	Registration Se Division of Cor			
CUDIE	Sandpiper C			
SUBJE			ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Kerry Anne Schultz		
			Name of Person	<del></del>
Fountain, Schultz & Bridgford, PLLC				
			Firm/Company	<del></del>
		2045 Fountain Professiona	l Court, Ste. A	
			Address	
		Navarre, FL 32566		
		kaschultz@fountainlaw.com	City/State and Zip Code	
		E-mail address: (0	to be used for future annual report notifi	cation)
For furth	er information co	oncerning this matter, please ca	all:	
Kerry A	nne Schultz		850 939-3535 at ( )	
	Name of	Person		Telephone Number
Enclosed	l is a check for th	e 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



2019 7/13 16 PN 3: 10

Sandpiper Gulf, LLC		,
(Name of the Limited Liab (A Flori	ility Company as it now appears on our recordida Limited Liability Company)	<u>is.</u> )
The Articles of Organization for this Limited Liability Florida document number L13000164900	Company were filed on 11/25/2013	and assigned
This amendment is submitted to amend the following:	<del></del> -	
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	DRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or regregistered agent and/or the new registered office ad	ristered office address on our record	s, enter the name of the nev
The second district and the second district and	tures nere.	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre.	s.s
	, FI	orida
	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Alan R. McDuff	6210 Don Carlos Drive Pensacola, Florida 32507	Add
			■ Remove
			Change
MGR	Suzanne H. McDuff	6210 Don Carlos Drive Pensacola, Florida 32507	□ Add
			■ Remove
	Suzanne Hutto McDuff, Trustee of the		Change
MGR	McDuff Revocable Trust, dated 8/8/2019	6210 Don Carlos Drive Pensacola, Florida 32507	■ Add
			🖸 Remove
			□ Change
MGR	Alan Rea McDuff, Trustee of the McDuff Revocable Trust, dated 8/8/2019	6210 Don Carlos Drive Pensacola, Florida 32507	Add
			□ Remove
		<del> </del>	□ Change
			D Add
			Remove
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Note:	ive date, if other than the date of filing:  (optional)  ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
the red	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on 90th day after the record is filed.
Dated	August 8 . 2019
	Signature of a member or authorized representative of a member
	$\Lambda$ $\Lambda$ $\Lambda$ $\Lambda$ $\Lambda$

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Filing Fee: \$25.00