

L13000176530

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(Address)

(Address)

(City/State/Zip/Phone #)

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CLERK OF SUPERIOR COURT
JANET L. GIBSON, CLERK

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TURQUOISE LEGACY, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carole Collins

Name of Person

Firm/Company

P. O. Box 6727

Address

Kingman, AZ 86402

City/State and Zip Code

documentsbycarole@yahoo.com

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

For further information concerning this matter, please call:

Carole Collins

928 715-4855
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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**

TURQUOISE LEGACY, 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 December 24, 2013
Florida document number L13000176530

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9125 E Dilligaf Road

Kingman, AZ 86401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9125 E. Dilligaf Road

P. O. Box 6727

Kingman, AZ 86402

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:

New Registered Office Address:

Enter Florida street address

Florida

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Greenshoe Management LLC	3170 N. Federal Highway	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Lighthouse Point, FL 33064	<input type="checkbox"/> Change
MGR	Carole Collins	9125 E. Dilligal Rd.	<input checked="" type="checkbox"/> Add
		P. O. Box 6727	<input type="checkbox"/> Remove
		Kingman, AZ 86402	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective 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 605.0207 (3)(b)

Dated September 17, 2018

Robert Collins

Carole Collins

Filing Fee: \$25.00