

L13000178187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED  
14 JAN -2 AM 9:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN - 9 2014

T. BROWN

*Crabtree Law Group, P.A.*

ATTORNEYS AND COUNSELORS AT LAW

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December 31, 2013

8777 SAN JOSE BOULEVARD  
BUILDING A, SUITE 200  
JACKSONVILLE, FLORIDA 32217

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Florida Department of State  
Amendment Section  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Heritage Florida Property Holdings, LLC**  
**Ref. No.: L13000178187**

Dear Sir/Madam:

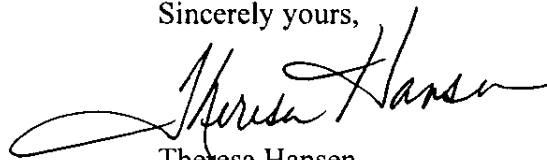
Enclosed please find the following for the above-referenced entity:

1. Articles of Amendment to Articles of Organization; and,
2. Our firm check in the amount of \$25.00 as payment of the filing fee for the above Amendment.

As such, we would appreciate your filing same at your earliest convenience.

Thank you most cordially for your assistance in this regard. Should you have any questions or need additional information, please do not hesitate to contact us.

Sincerely yours,



Theresa Hansen  
Legal Assistant

/th  
enclosure (as above-sated)

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**HERITAGE FLORIDA PROPERTY HOLDINGS, LLC**

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

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on Dec. 30, 2013 and assigned Florida document number L13000178187.

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:**

**(Principal office address MUST BE A STREET ADDRESS)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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:**

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or 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>
MGRM	CHRISTIAN ALLEN INC	3721 DuPont Station Ct. S. Jacksonville, FL 32217	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	KAPASS CORP	3721 DuPont Station Ct. S Jacksonville, FL 32217	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	B&L INVESTMENTS OF JACKSONVILLE, LLC	13968 Bromley Point Dr. Jacksonville, FL 32225	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	STEVEN RALYS	654 Ocean Blvd. Atlantic Beach, FL 32233	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Christian A. Allen	3721 DuPont Station Ct. S Jacksonville, FL 32217	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Kyle A. Passkiewicz	3721 DuPont Station Ct. S Jacksonville, FL 32217	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

**Additional MGRs to be REMOVED:**

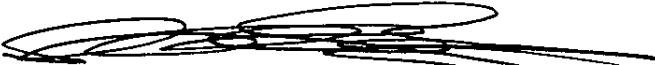
Bob Alligood, 13698 Bromley Pt. Dr., Jax, FL 32225

Steven Ralys, 9838 Old Baymeadows Rd., #320, Jax, FL 32256

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated **December 31**, **2013**

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
**R.R. Crabtree, Esquire - Authorized Representative**  
\_\_\_\_\_  
Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**