## 14000013578

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Filed as Name Change
Amendment only.
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3/11/14

## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Division of Corporations	·
SUBJECT: AUDION MANAGIN Name of Limited	ent LLC
Name of Limited	Liability Company
The enclosed Articles of Amendment and fee(s) are submit	ted for filing.
Please return all correspondence concerning this matter to t	he following:
George J	Stryw Name of Person
Avalon Estal	es Monoyemant LLC Firm/Company
1936 Hork	Dorton Drive
Furt Pierce	FL 34946 City/State and Zip Code
	e used for future annual report notification)
For further information concerning this matter, please call:	
George J Stenger Name of Person	at (772) 215-4256 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AVALON MARAGEMEN	+ LLC
A VALON MONGLEMEN (Name of the Limited Liability Compar (A Florida Limited L	
The Articles of Organization for this Limited Liability Company Florida document number <u>L14000013578</u> .	were filed on $\frac{\partial 1/\partial 4/\partial 014}{\partial 1/\partial 1/\partial 1/\partial 1/\partial 1}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi  AUALON ESTATES MANAGEM  The new name must be distinguishable and end with the words "Limited Liabi	ent LLC  lity 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)	1936 Harbortown Drive Fort PierceFL 34946
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1936 Horborton Drive Fort Pierce FL 34946
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: Gent  New Registered Office Address: 1936	Horbertown Drive  Enter Florida street address
	Pierce , Florida 34946  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

Page 1 of 3

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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Filing Fee: \$25.00