

L14000024635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

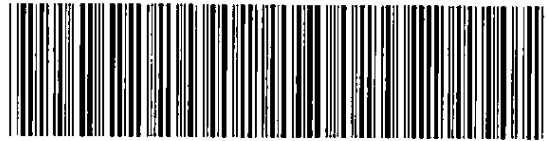
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800331219328

07/03/19--01001--004 \*\*60.00

FILED  
2019 JUL -3 PM 1:20  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
19 JUL -3 PM 1:10  
CLERK OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

JUL 03 2019

M. SOLOMON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LAKEVIEW BOYS HOME LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

TERRANCE WILLIAMS  
Name of Person  
LAKEVIEW BOYS HOME LLC  
Firm/Company  
2734 KEENE PARK DRIVE  
Address  
LARGO, FL 33771  
City/State and Zip Code  
lakeviewboyshome@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TERRANCE WILLIAMS at (727) 641-2739  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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**

LAKEVIEW BOYS HOME, 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 2/12/14 and assigned Florida document number 44000024635

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 "LLC."

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 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          | ROBERT LANGSTON | 2255 QUEEN STREET SO.    | <input type="checkbox"/> Add               |
|              |                 | ST. PETERSBURG, FL 33712 | <input checked="" type="checkbox"/> Remove |
|              |                 |                          | <input type="checkbox"/> Change            |
|              |                 |                          | <input type="checkbox"/> Add               |
|              |                 |                          | <input type="checkbox"/> Remove            |
|              |                 |                          | <input type="checkbox"/> Change            |
|              |                 |                          | <input type="checkbox"/> Add               |
|              |                 |                          | <input type="checkbox"/> Remove            |
|              |                 |                          | <input type="checkbox"/> Change            |
|              |                 |                          | <input type="checkbox"/> Add               |
|              |                 |                          | <input type="checkbox"/> Remove            |
|              |                 |                          | <input type="checkbox"/> Change            |
|              |                 |                          | <input type="checkbox"/> Add               |
|              |                 |                          | <input type="checkbox"/> Remove            |
|              |                 |                          | <input type="checkbox"/> Change            |
|              |                 |                          | <input type="checkbox"/> Add               |
|              |                 |                          | <input type="checkbox"/> Remove            |
|              |                 |                          | <input type="checkbox"/> Change            |

2018 JUL -3 PM 1:20

FILED

Blank lined paper.

100

2019 JUL -3 PM 1:20

7

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JULY 2, 2019

L. Williams

Signature of a member or authorized representative of a member

TERRANCE WILLIAMS

Typed or printed name of signee