

L14000051503

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

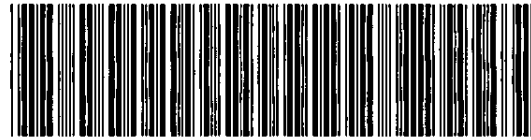
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300268087483

01/14/15--01002--021 \*\*75.00

FILED

2015 JAN 14 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 29 2015  
J. HARRIS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BARN STREET BUSINESS CENTER, 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:

**SHAYNA REICH**

Name of Person

Firm/Company

**10783 NARCOOSSEE ROAD, SUITE 117**

Address

**ORLANDO, FL 32832**

City/State and Zip Code

**shayna@reichproperties.com**

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

For further information concerning this matter, please call:

**ANNA BUNGART**

**407**

**847-4888**

Name of Person

at ( )

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**

**BARN STREET BUSINESS CENTER, 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 03/28/2014 and assigned Florida document number L14000051503.

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)**

10783 NARCOOSSEE ROAD SUITE 117

ORLANDO, FL 32832

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

10783 NARCOOSSEE ROAD SUITE 117

ORLANDO, FL 32832

**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:

10783 NARCOOSSEE ROAD SUITE 117

Enter Florida street address

ORLANDO

City

, Florida 32832

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**

**FILED**  
2015 JAN 14 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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>
MGR	REICH, JOHN C.	2701 MICHIGAN AVENUE	<input type="checkbox"/> Add
		SUITE J	<input checked="" type="checkbox"/> Remove
		KISSIMMEE, FL 34744	
MGR	REICH, SHAYNA T.	2701 MICHIGAN AVENUE	<input type="checkbox"/> Add
		SUITE J	<input checked="" type="checkbox"/> Remove
		KISSIMMEE, FL 34744	
MGRM	REICH, JOHN C.	10783 NARCOOSSEE ROAD	<input checked="" type="checkbox"/> Add
		SUITE 117	<input type="checkbox"/> Remove
		ORLANDO, FL 32832	
MGR	REICH, SHAYNA	10783 NARCOOSSEE ROAD	<input checked="" type="checkbox"/> Add
		SUITE 117	<input type="checkbox"/> Remove
		ORLANDO, FL 32832	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2015 JAN 14 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

---

---

---

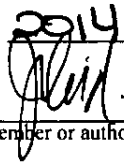
---

---

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

*(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)*

Dated December 15, 2014.



\_\_\_\_\_  
Signature of a member or authorized representative of a member

John C. Reich

\_\_\_\_\_  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
2015 JAN 14 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA