# 14400053341

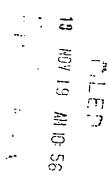
(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
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## **COVER LETTER**

Divisi	ion of Corp	oorations		
SUBJECT:	GARDEN 2	41 LLC		
JOGGET.		Name of Limi	ted Liability Company	<del></del>
The enclosed A	Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return a	II correspoi	ndence concerning this matter (	to the following:	
		RUSSELL F COON		
			Name of Person	<del></del>
		GARDEN 241 LLC		
		- · · · · · · · · · · · · · · · · · · ·	Firm/Company	
		20745 S BUCKHILL RD		
			Address	
		CLERMONT, FL 34715		
			City/State and Zip Code	
		RUSSCOON13@YAHOO.		
		E-mail address: (1	o be used for future annual report notif	ication)
For further info	ormation co	oncerning this matter, please ca	all:	
RUSSELL F.	COON		321 303-2520 at ( )	
	Name of	Person	at () Area Code Daytime	e Telephone Number
Enclosed is a c	check for th	e following amount:		
■ \$25.00 Fili	ing 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

GARDEN 241 LLC		
( <u>Name of the Limited Liability</u> (A Florida)	Company as it now appears on our record Limited Liability Company)	<u>s.</u> )
he Articles of Organization for this Limited Liability Co	ompany were filed on 4/1/2014	and assigned
orida document number L14000053341		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limit	ed liability company here:	
		. 📆
e new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC	or the abbreviation "L.I.,C."
nter new principal offices address, if applicable:		5 m
<u>rincipal office address MUST BE A STREET ADDRI</u>	<u> </u>	
		ب ن
iter new mailing address, if applicable:	<del></del>	·
lailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registe	ered office address on our records	enter the name of the
vistered agent and/or the new registered office addr	<u>ess here</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street addres	s
	El	
<del></del>	, FIG	orida

### 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>	Address	Type of Action
A R	CHRISTINE BOOTHE	P.O. Box 591 Groveland, FL 34736	
			■ Remove
AMBR	CHRISTINE BOOTHE	P.O. Box 591 Groveland, FL 34736	
			■ Remove
		<del></del>	☐ Change
AMBR	RUSSELL F. COON (C)	20745 S BUCKHILL RD CLERMONT, FL 34715	Add
	guardian for Joshua Coon	<del></del>	Remove
			Change
			Remove
			, •
			Change OT Change
		<del></del>	□ Remove
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			<u>.                                    </u>
		<del></del>	
			<del>.</del>
ective date, if other than the		to data of Clima and these (V	(optional) days after filing.) Pursuant to 605.02
te: If the date inserted in this blo ument's effective date on the Do	ock does not meet the application	cable statutory filing requirer	nents, this date will not be listed
record specifies a delayed he 90th day after the reco	effective date, but no ord is filed.	ot an effective time, at	12:01 a.m. on the earlier
ed NOVEMBER 7	2018		
		_ <del>_</del> ·	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00