

2/1/2016

Division of Corporations

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : DUSS, KENNEY, SAFER, HAMPTON & JOOS, P.A.
Account Number : 120090000089
Phone : (904)543-4300
Fax Number : (904)543-4301

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THE ALLEGRO AT CASSELBERRY, L.L.C.

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$60.00

FEB 08 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Allegro at Casselberry, L.L.C.

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:

Theresa M. Kenney, Esq.

Name of Person

Duss, Kenney, Safer, Hampton & Joos, PA

Firm/Company

4348 Southpoint Blvd. Suite 101

Address

Jacksonville, FL 32216

City/State and Zip Code

rkarn@allegroliving.com

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

For further information concerning this matter, please call:

Theresa M. Kenney, Esq.

904

543-4300

at ()

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 FEB -5 AM 10:24

FILED

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

The Allegro at Casselberry, L.L.C.

(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 April 22, 2014 and assigned
Florida document number L14000065250

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 "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

City

Florida

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>
AMBR	HSRE-ASL Casselberry, LLC	c/o Allegro Management Company	<input checked="" type="checkbox"/> Add
		212 South Central Avenue, #301	<input type="checkbox"/> Remove
		St. Louis, MO 63105	<input type="checkbox"/> Change
AMBR	Hallmark Investment Corporation	212 South Central Avenue	<input type="checkbox"/> Add
		Suite 301	<input checked="" type="checkbox"/> Remove
		St. Louis, MO 63105	<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

SECRETARY OF STATE
 16 FEB 05
 10:23
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

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16 FEB - 5 AM 10:26
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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 prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated January 29, 2016



Signature of a member or authorized representative of a member

Robert B. Karn, Authorized Signatory

Typed or printed name of signer