Division of Corporations Electronic Filing Cover Sheet

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(((H210004605993)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE VILLAGES OF LAKE-SUMTER, INC.

Account Number : I20180000040 Phone : (352)753-6731 : (352)753-6716 Fax Number

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

	Address:			
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SARAH ASHLEY, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$30.00

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Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section
Division of Corporations

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	ASHLEY, LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	AMY L. YOUNG		
		Name of Person	
	VILLAGES OFFICE OF C	GENERAL COUNSEL	
		Fum/Company	
	3619 KJESSEL ROAD		
		Address	
	THE VILLAGE, FL 32163	3	
		City/State and Zip Code	
	sarahashleyllc@gmail.com		
	E-mail address: (to be used for future annual report notif	fication)
For further information	n concerning this matter, please c	all:	
AMY L. YOUNG		352 753-6729	
Nan	ne of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	or the following amount:		
525.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	C \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	on Section f Corporations	Street Address: Registration Se Division of Con The Centre of T 2415 N. Monro Tallahassee, FI	rporations Fallahassee se Street, Suite 810

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SARAH ASHLEY, LLC		10000000000000000000000000000000000000
(Name of the Limiter	Liability Company as it now appears on our records.) A Florida Limited Liability Company)	20
The Articles of Organization for this Limited Lia Florida document number L14000124596	bility Company were filed on AUGUST 8, 2014	and assisted 30
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
SARAH ASHLEY HUDSON, LLC		<u></u>
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applica	hle:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u></u>	
		name of the new registere
Name of New Registered Agent:		
(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 AUGUST 8, 2014 and assign an		
	Enter Florida street address	
		
	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

_ Change

MGR = Manager

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

$\mathbf{AMBR} = \mathbf{A}$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change
			
			Remove
			□Add
			Remove
			Change
			□ Add
			Remove
			Change
			□Add
			Change
			□Remove

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fan effective date Note: If the dat	if other than the is listed, the date me to inserted in this lective date on the	ust be specific a block does no	and cannot be p t meet the ap	piicable statt	filing or more story filing re	than 90 days a	ptional) fter filing.) Pu this date wil	rsuant to 605.0 I not be listed
e record specific ed is filed.	es a delayed effect	ive date, but n	ot an effectiv	ve time, at 12	:01 a.m. on t	he earlier of	:(b) The 9	0th day after 1
Dated	BER 18	4	2021	·				
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Filing Fee: \$25.00

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