

L14 00014Z121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

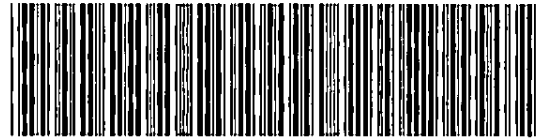
(Business Entity Name)

(Document Number)

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

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# CRYSTAL

Title & Escrow Co., Inc.

135 SE 5<sup>th</sup> Avenue, Ste. 202  
Delray Beach, FL 33483  
561-330-2480 Fax 888-692-8440  
PHC@CRYSTALTITLE.BIZ

June 5, 2019

Florida Dept. of Corporations  
Clifton Bldg.  
2661 Executive Center Circle  
Tallahassee, FL 32301

**RE: Change of Managers  
Pelican Investment Group, LLC  
717 Lake Avenue, LLC**

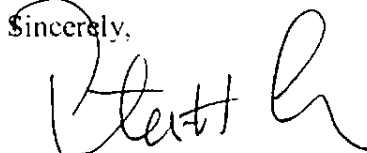
Dear Sir or Madam:

I have enclosed the forms (and checks) to change managers for the above-referenced.

I was hoping to make this change online. Unfortunately, that is not the case so any assistance in expediting this change would be most appreciative.

Should you have any other questions, feel free to call on my cell at 561-715-0305.

Sincerely,



Peter H. Carney, Esq.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pelican Investment Group, 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:

PETER H. CARNEY  
Name of Person

CARNEY Stanton, P.L.  
Firm/Company

135 SE 5<sup>TH</sup> AVENUE, Ste. 202  
Address

DeLay Beach, FL 33483  
City/State and Zip Code

~~786~~  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Carney at ( 561 ) 715-0305  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Pelican Investment Group, 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 9/10/2014 and assigned  
Florida document number L 14000142121.

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

, 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 conform to 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 filing 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>
<u>m6R</u>	<u>Steve Labor</u>	<u>900 E. Atlantic Ave</u>	<input type="checkbox"/> Add
		<u>Ste. 5</u>	<input checked="" type="checkbox"/> Remove
		<u>Dalray Beach, FL 33483</u>	<input type="checkbox"/> Change
<u>m6R</u>	<u>Phillip McFillin</u>	<u>996 Pelican Lane</u>	<input checked="" type="checkbox"/> Add
		<u>Gulf Stream, FL 33483</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee