14400163899

(Requestor's Nam	e)
(Address)	
(Address)	
(City/State/Zip/Pho	one #)
PICK-UP WAIT	MAIL
(Business Entity N	Jame)
(Document Numb	er)
Certified Copies Certifica	ites of Status
Special Instructions to Filing Officer.	

Office Use Only



600300335536

08/20/17--01033--028 ••55.00

2011 JUN 20 PM 3: 35

K. SALY JUN 22 2017

COVER LETTER

TO:		istration Sect sion of Corpo			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		The Club at B	Boynton Beach, LLC		
Surie	CI:		Name of Limite	d Liability Company	····
The ene	loseđ	Articles of Ar	mendment and fee(s) are subm	itted for filing.	
Please r	eturn	all correspond	lence concerning this matter to	the following:	
			Oliver Von Troll		
				Name of Person	
			The Club at Boynton Beach,	LLC	
				Firm/Company	
			1831 SW 7th Avenue		
			-	Address	
			Pompano Beach, FL 33060		
				City/State and Zip Code	
			oliver@kdconstruction.us		
			E-mail address: (to	be used for future annual report notification	ation)
For furt	her in	formation con	cerning this matter, please call	l:	
Steven	W. De	eutsch, Esq.		954 474-8000	
		Name of P	erson	at ()	'elephone Number
Enclose	d is a	check for the	following amount:		
□ \$ 25	.00 Fi	ling 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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



THE CLUB AT BOYNTON BEACH, 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 Liab	ility Company were filed on October 21, 2012	and assigned
Florida document number L14000163899	·	
This amendment is submitted to amend the following	ing:	
A. If amending name, <u>enter the new name of th</u>	e limited liability company here:	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation "LLC	0" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •	·	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	·
B. If amending the registered agent and/or		s, enter the name of the new
registered agent and/or the new registered office	e address here:	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre:	<u> </u>
-	, F1	orida 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>	Address	Type of Action
MGR	KARL DAVIS	1831 SW 7TH AVENUE	□ Add
		POMPANO BEACH, FL 33060	■ Remove
			☐ Change
			Add
			Regnove
			20 THAN
			☐ Change
			Add
			□ Remove
			☐ Change
			
			□ Remove
			□ Change
			D Add
			Remove
			Change

1017 turk 20 to 5 Visitor
1017 SUM 20 PM 3: 30
1017 BUH 20 PM 3: 30
DOLLANDSSEL FLORING
1017 UN 20 THE STATE OF STATE
DIT WIN 20 TO SUPPLY STORY
CLAMASSELL FLORING
SSEC. FLORING
SEC. F. O. 10.
- FLOWING
··
al) ing.) Pursuant to 605.0207 (, ate will not be listed as th
n. on the earlier of:

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00