114000 169127

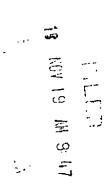
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Speciał Instructions to	Filing Officer:	





600320983076

11/19/18--01016--003 **25.00



O SIMMONS DEC 0 1 2018

COVER LETTER

Division of Corp	oorations		
SUBJECT: <u>Gem</u>	of the Hills Co	onstruction LLC ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are subr	mitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Michael Le	Pathers Hewell Name of Person	
	Gem of the	Hills Construction	in LLC
	11548 Holn	mes Dr. Address	
	<u>Clermont</u> , F	City/State and Zip Code	
	gem of the hill E-mail address: (i	SLLC@ gmail. Co	rication)
For further information co	oncerning this matter, please ca	all:	
Michael Lea Name of	thers Hewett Person	at (352) 217- Area Code Daytime	0072 Telephone Number
Enclosed is a check for th	e 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:

ΓO: / Registration Section

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

11

Gem of the Hils Cons	struction LLC	
(A Florid	ty Company as it now appears on o a Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability (Florida document number <u>L14000(69124</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	200
Enter new mailing address, if applicable:		20 °
(Mailing address MAY BE A POST OFFICE BOX)		3
intuming Boar Co. Marie Burn Co.		
	- 1 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 	
B. If amending the registered agent and/or registered agent and/or the new registered office add		records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet 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 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:

MCD =	Manager	
MOK	Manager	
AMRD	= Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Christian Loyd	475 W. Lakeshore Dr.	🖸 Add
		Clermont, FL 34711	Remove
			Change
AMBR	Daniel Kyle	403 W. Oscrola St. Minneola, FL 34715	⊅X∧dd
·	·	Minneola, FL 34715	🗆 Remove
			☐ Change
			□ Change
			Add:
			Remove
		· · · · · · · · · · · · · · · · · · ·	ූ □¶Change
			□ Remove
			☐ Change
		 	🗆 Add
			□ Remove
			Change

If amending any other information, enter change(s) here: (Attach additional sheets, if nece	essary.)
	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
	<u>.</u>
	٠.,
	Ğ.
	
	
Effective date, if other than the date of filing:	filing.) Pursuant to 605.0207
ne record specifies a delayed effective date, but not an effective time, at 12:01 a The 90th day after the record is filed.	.m. on the earlier of
Dated 11 13 18	
Signature of a member or authorized representative of a member	
Michael Leathers Hewett Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00