

L14000195947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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APR 29 2015

617



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 16, 2015

PENNY EVERY  
595 W GRANADA BLVD SUITE A  
ORMOND BEACH, FL 32174

SUBJECT: DUNLAWTON YORKTOWNE UNIT 1, LLC  
Ref. Number: L14000195947

We have received your document for DUNLAWTON YORKTOWNE UNIT 1, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 115A00007594

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DUNLAWTON YORKTOWNE UNIT 1, 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:

Penny K. Every  
Name of Person

Jeffrey C. Sweet, Esquire  
Firm/Company

595 W. Granada Blvd., Suite A  
Address

Ormond Beach, FL 32174  
City/State and Zip Code

penny.every@jsweetlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Penny K. Every at (386) 677-3431  
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**

DUNLAWTON YORKTOWNE UNIT 1, 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 12/29/14 and assigned  
Florida document number L14000195947.

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 end with 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*

**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**

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CLERK OF COURT  
JULIA S. FORD  
TALLAHASSEE, FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGR	AC INVESTORS, LLC	444 Seabreeze Blvd.	<input type="checkbox"/> Add
		Suite 1000	<input checked="" type="checkbox"/> Remove
		Daytona Beach, FL 32118	
MGR	AC INVESTORS LIMITED PARTNERSHIP	444 Seabreeze Blvd.	<input checked="" type="checkbox"/> Add
		Suite 1000	<input type="checkbox"/> Remove
		Daytona Beach, FL 32118	
MGR	LIGHTCO, LP	444 Seabreeze Blvd.	<input type="checkbox"/> Add
		Suite 1000	<input checked="" type="checkbox"/> Remove
		Daytona Beach, FL 32118	
MGR	LIGHTCO LIMITED PARTNERSHIP	444 Seabreeze Blvd.	<input checked="" type="checkbox"/> Add
		Suite 1000	<input checked="" type="checkbox"/> Remove
		Daytona Beach, FL 32118	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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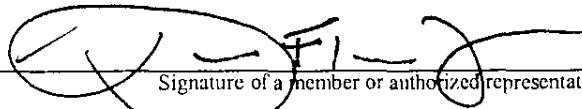
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 3/16/, 2015



Signature of a member or authorized representative of a member

Paul F. Holub, Jr., Manager

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA