# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000047203 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323) 962-8600 : (323)962-3889 Fax Number

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

Email	Address:				
				 -	•

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLORIDA PINE GROUP HOMES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

B. BOSTICK

Electronic Filing Menu

Corporate Filing Menu

Help

FEB **2 5** 2015

**EXAMINER** 

	COVERLETTER	
TO: Registration Se Division of Cor		·
SUBJECT:	PINE GROUP HOMES, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	Amendment and fee(s) are submitted for filing.	
Pléase réturn all correspo	ondence concerning this matter to the following:	
	Cheyenne Moseley	
	Name of Person	Andrew Control of the
	Legalzoom.com, Inc.	
	Firm/Company	
	100 W. Broadway Suite 100	2015 1
	Address	E8 21
	Glendale, CA:91210	GRETARY GRETARY
	City/State and Zip Code	
	8.m9.3mm@gmail.com  E-mail address: (to be used for future annual report notifi	
For further information c	c-man address. (to be deed for intente similar report norms concerning this matter, please call:	20
lmelda Vasquez	323 962-8600 ex	i 7950
Name o	f Person Area Code Daytime	Telephone Number
Enclosed is a check for the	nc following amount:	
El \$25,00 Filing Fee	Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)	Certificate of Status & Certificate 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, FL 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA PINE GROUP HOMES, LLC		
(Name of the Limited Liability Compa (A Florida Limited )	ny as it new appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 01/20/2015	and assigned
Florida document number £15000010919		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	N
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or	die abbreviation "L. I
Enter new principal offices address, if applicable:	1100 NE 11th Avenue, Apt. 2	The state of the s
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale Florida 33304	
	The formal was substituted all alleged defining and the same and the same and the same appropriate and the same	
Enter new mailing address, if applicable:	PO Box 4795	- 第4 年 2 年 2 日 1 日 1 日 1 日 1 日 1 日 1 日 1 日 1 日 1 日
(Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale Florida 33338	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ter the name of the new
remered agent and/or the her registered office and ess tiere	<b>:</b> •	
Name of New Registered Agent:	and the second s	**************************************
New Registered Office Address:		
	Enter Florida street address.	, <del></del>
,	, Florida	Zip Code.
New Registered Agent's Signature, if changing Registered Agent:		zajr Com:

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

□ Rentove

1100 NE 11th Avenue, Apt. 2 Fort Lauderdale Florida 33304	
	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
ctive date, if other than the date of filing:  Heative date must be specific, cannot be prior to date of receipt or filed date and cannot late this document is filed by the Florida Department of State)	
d tehroary 18 2015	
ed Fabrocery 18th 2015	<u>··</u> .
signature of a member or authorized representati	ve of a member

Page 3 of 3

Filing Fee: \$25.00

2015 FEB 24 A 10: 20