U5000014080

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COVER LETTER

Division of Co	orporations				
CIRCLE N					
		Name of Limited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Megan Mosher				
	Circle M, LLC	Name of Person			
	1950 Laurel Manor Drive,	Firm/Company Suite 130	·		
	The Villages, Ft. 32162	Address			
	mmosher1069@gmail.com	City/State and Zip Code			
		to be used for future annual report notifi	cation)		
For further information	concerning this matter, please c	all:			
Megan Mosher		352 216-1783			
Name	of Person	at () Area Code Daytime	Telephone Number		
Enclosed is a check for	the 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:

TO:

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

	O	PF'	%
CIRCLE M, LLC			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Name of the Limi	ted Liability Compa (A Florida Limited I	iny as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited L. Florida document number L15000014080	·	were filed on	2015 sind assigned Fig. 28
This amendment is submitted to amend the following	rfollowing: me of the limited liability company here: the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." pplicable:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation "	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	1950 Laurel Manor Drive,	Suite 130
(Principal office address MUST BE A STREET ADDRESS)		The Villages, Florida 3216	2
Enter new mailing address, if applicable:		1950 Laurel Manor Drive,	Suite 130
(Mailing address MAY BE A POST OFFICE BOX)		The Villages, Florida 3216	2
B. If amending the registered agent and registered agent and/or the new registered of			ords, enter the name of the new
Name of New Registered Agent:	Jeffrey P. Skate	s, Esq.	
New Registered Office Address:	1028 Lake Sum	nter Landing	
		Enter Florida street ac	ldress
	The Villages		, Florida 32162
		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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name Rence B. Morse	Address 1950 Laurel Manor Dr. Suite 130	Type of Action
Mgr		The Villages, Florida 32162	
			Remove
			Change
			Add
			🗆 Remove
			Change
			Add
			🖸 Remove
			□ Change
			Remove
			Change
			□ Change
			□ Remove
			☐ Change

If amending any other information.	n, enter change(s) here: (Attach additional sheets, i	f necessary.)
		
	 	
		
		
		
		···
Note: If the date inserted in this block document's effective date on the Depa the record specifies a delayed e	specific and cannot be prior to date of filing or more than 90 day does not meet the applicable statutory filing requirement rtment of State's records. ffective date, but not an effective time, at 12	ts, this date will not be listed as t
The 90th day after the record		
October 12 Dated	2018	
Besee & Sign	matrice of a member or authorized representative of a member	
Rence B. Morse, Manager	(2018 OCT
	Typed or printed name of signee	CT 19
	Page 3 of 3	S S E
	Filing Fee: \$25.00	5: 2 5: 2