## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FISHER, TOUSEY, LEAS & BALL

Account Number: I19990000021

Phone : (904)356-2600 Fax Number : (904)355-0233

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

**□S LLC AMND/RESTATE/CORRECT OR M/MG RESIGN** GILES MANAGEMENT, LLC

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Corporate Filing Menu

Help

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

		GEMENT, LLC				
(Name of the Limits	A Florida Limited L	ny as it now anne Jability Company	ars on our records.)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
the Articles of Organization for this Limited Liability Company were filed on February 4, 2015  Clorida document number L15000021515			and essigned			
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liab	ility company	here:			
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the	designation "LLC" or the	abbreviation	n "L.L.	<del>c.</del> "
Enter new principal offices address, if applica	able:	184 San Juan	Drive			
Principal office address MUST BE A STREE		Ponte Vedra I	Beach, Florida 32082		S	
				33. 350	S	, j
Enter new mailing address, if applicable:		184 San Juan	Drive	ARTE	1 CT 20*	Enskeys Enskeys Contract
(Mailing address MAY BE A POST OFFICE BOX)		Ponte Vedra	Beach, Florida 32082	FLOR	<del>-</del> 9-	1
					=	
B. If amending the registered agent and/ registered agent and/or the new registered of			on our records, ente	r the na	me of	the n
		<b>-</b>				
Name of New Registered Agent:		<b></b>				
New Registered Office Address:	184 San Juan D					
	Enter Florida street address					
	Ponte Vedra Be		, Florida	32082		
		City		Zip C	Code	

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 Register

Page 1 of 3

MGR = Manager

. . . .

If amending Authorized Person(s) authorized to manage, enter the title, pame, and address of each person being added or removed from our records:

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AMBR =	Authorized Member		···
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Giles, Aaron C	184 San Juan Drive	D Add
		Ponte Vedra Beach, Florida 32082	□ Remove
,			E Change
AGR	Giles, Jay J	184 San Juan Drive	D Add
		Ponte Vedra Beach, Florida 32082	□ R¢move
	•		€ Change
/GR	Giles, Evan J	184 San Juan Drive	Add
		Ponte Vedra Beach, Florida 32082	Remove
			The Change
AGR	Giles, John E	184 San Juan Drive	SSEE Add
		Ponte Vedra Beach, Florida 32082	S Remove
			Change
	•		
		<u> </u>	□ Remove
			Change
<del></del>	<u> </u>		Add
			C Remove
			Change

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Fective date, if other than the date of effective date is listed, the date must be ter. If the date inserted in this block cument's effective date on the Depar	e of filing: specific and camos be prior to date of filing or does not meet the applicable statutory fili		.0207 (3)(b) ed as the
The 90th day after the record	'ective date, but not an effective is filed,	time, at 12:01 a.m. on the earlie	er of:
ited July 29-12	2015		
OCA	i De		
2	nature of a member or authorized representati	ve of a member	

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