

L15000039005

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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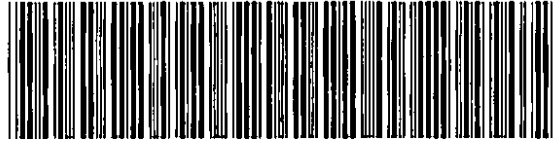
(Business Entity Name)

(Document Number)

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2022 MAR 21 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

APR 04 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sanford Avenue, 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:

Bobby P Duncan
Name of Person

Sanford Avenue, LLC
Firm/Company

113 Overoaks Place
Address

Sanford, FL 32771
City/State and Zip Code

bobduncan@allstate.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bobby P Duncan at (407) 687-7346
Name of Person 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:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2022 MAR 21 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FL

Sanford Avenue, 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 January 13, 2014 and assigned
Florida document number LI5000038005.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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

City Florida 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

[illegible]

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

Article VI - Interest of Members

Bobby P. Duncan and William J. David shall own equal interest in Sanford Avenue, LLC.

Article VII - Passing of Interest in Business

Should Bobby P. Duncan be deceased, all of his interest and rights in the business shall pass in full to Paula D.

Duncan. Should both Bobby P. Duncan and Paula Denise Duncan be deceased, then all Bobby's interest and rights in the business shall pass in full to Bobby Jay Duncan and Melissa Duncan Rosendahl, equally.

Should William J. David be deceased, all of his interest and rights in the business shall pass in full to Jennifer E.

David. Should William J. David and Jennifer E. David be deceased, then William's interest and rights in the business shall be divided as follows:

- 50% of William's interest shall pass in full to William J. David, Jr. and Philip M. David, equally.

- 50% of William's interest shall pass in full to Christin J. Darr, Shawn D. Darr, Sarah M. Darr and Joshua D. Darr, equally.

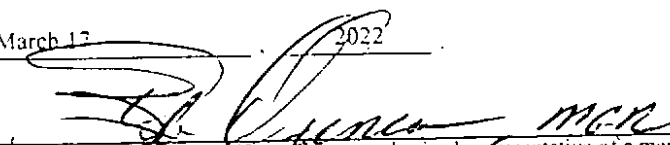
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated March 17, 2022


Signature of a member or authorized representative of a member

Bobby P Duncan

Typed or printed name of signee

Filing Fee: \$25.00