

L15000046882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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15 AUG 20 PM 3:40
CLERK OF COURT
ALACHUA COUNTY, FLORIDA

AUG 21 2015

Y SULKER

Via Regular Mail

August 17, 2015

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

To whom it may concern,

Please find enclosed the documents required to add an authorized person to manage Carleton Five Points LLC, as well as to change the Registered Office address. I have also enclosed the required \$25.00 fee.

Please contact me if you have any questions or require any additional information. My contact information is as follows:

Evan P. Kristol
3229 Harrington Drive
Boca Raton, FL 33496
(954) 245-3459

Thank you for your assistance.



Evan P. Kristol

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Carleton Five Points 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:

Evan P. Kristol
Name of Person

Carleton Five Points LLC
Firm/Company

3229 Harrington Drive
Address

Boca Raton, FL 33496
City/State and Zip Code

evan.kristol@marcusmillichap.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Evan P. Kristol at (954) 245-3459
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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Carleton Five Points 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 March 16, 2015 and assigned
Florida document number L15000046882.

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 "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:

8201 Peters Road, Ste. 100

Enter Florida street address

Fort Lauderdale

, Florida

33324

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

☐ Add
☐ Remove
☒ Change
☐ Add

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

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-15-20 BY 60322

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 August 17, 2015

Evangelist

Signature of a member or authorized representative of a member

Evan P. Kristol

Typed or printed name of signee