

# LIS000129616

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D. SCOTT

NOV 8 2016



## WINKLER LAW

Joseph E. Keavy, JD  
jekeavy@winkler-law.com  
www.winkler-law.com

The Winkler Group LLC  
1699 E. Woodfield Road, Suite 400  
Schaumburg, Illinois 60173

TELEPHONE (847) 466-5280  
FACSIMILE (847) 466-5330

November 1, 2016

**BY FIRST CLASS U.S. MAIL**

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

Re: 601 SANKEY, LLC  
File No.: L15000129616

Dear Sir/Madam:

Enclosed please an original and duplicate copy of the Articles of Amendments to the Articles of Organization of 601 Sankey, LLC and a check in the amount \$60.00 for the filing fee, certified copy and certificate of status. After this document has been filed with the Secretary of State, please return a copy of the requested documents to our office in the enclosed envelope.

Should you have any questions regarding this matter, please feel free to contact our office.

Very truly yours,

THE WINKLER GROUP LLC

JEK

Enclosures: (3)

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 601 SANKEY, 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:

Thomas W. Winkler

\_\_\_\_\_  
Name of Person

The Winkler Group LLC

\_\_\_\_\_  
Firm/Company

1699 E. Woodfield Rd., Suite 400

\_\_\_\_\_  
Address

Schaumburg, IL 60173

\_\_\_\_\_  
City/State and Zip Code

tom@winkler-law.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas W. Winkler

847 466-5280  
at ( )  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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16 NOV - 7 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

601 SANKEY, 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 July 28, 2015 and assigned  
Florida document number L15000129616.

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)**

130 Golf View Circle

Prospect Heights, IL 60070

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

130 Golf View Circle

Prospect Heights, IL 60070

**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

Florida

City

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**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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Glenn J. Sprezel	130 Golf View Circle	<input checked="" type="checkbox"/> Add
		Prospect Heights, IL 60070	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mr. Matthew W. Sprezel	1310 Hamilton Parkway	<input type="checkbox"/> Add
		Itasca, IL 60143	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

[illegible]

**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 construed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated OCTOBER 31, 2016

Anna C. Trinkl

Signature of a member or authorized representative of a member

Thomas W. Winkler, Authorized Representative

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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