

- 3 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 : GILLIGAN, GOODING & FRANJOLA, P.A. Account Number : I20010000016 Phone : (352)867-7707 Fax Number : (352)867-0237

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

Email Address:



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.09/30/2015 16:1		GGF LAW FIRM	24	PAGE 02/05
H15000	235098 3	COVER LETTER		
TO: Registration S				
Division of Co	rporations			
SUBJECT: <u>Baseline</u>	Davcare Property, LLC Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
	ondence concerning this matter	-		
Tioase totali all'ontesp	ondence concerning and matter	to the following:		
	W. James Goodi	na III		
	W. James Goodi	Name of Person		
		- ·		
	<u> </u>	g & Franjola, P.A. Firm/Company		
	1531 SE 36th Av	enue Address		
		Autras		
	Ocala, FL 344			
		City/State and Zip Code		
	jgooding@ocala E-mail address: (to be used for future annual report notifie	cation)	
For further information c	concerning this matter, please ca	11:		
	Hayter	at (<u>352</u>) <u>867-7707</u>	Talanka - N.	
Name o	Di Person	Arca Code Daytime	Telephone Number	
Enclosed is a check for the	-	H		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Stat	
		(additional copy is enclosed)	Certified Copy (additional copy is on	closed)
				·
	ING ADDRESS: ration Section	STREET/COURIE Registration Section		
Divisio	on of Corporations	Division of Corporat		
	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Cent	or Circle	
1 40408	коочч, I II <i>323</i> 14	Tallahassee, FL 3230		

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09/30/2015 16:14		GGF LAW FIRM	PAGE 03/
1500023	509 84	CLES OF AMENDMENT TO	
		LES OF ORGANIZATION	
		OF	
Ba:	<u>eline Davcare Property</u> (<u>Name of the Limited L</u> (A F	. LLC lability Company as it now appears on our record lorida Limited Liability Company)	<u>9,</u>)
The Articles of Organizatio	n for this Limited Liabil	ity Company were filed on <u>September 28, 3</u>	2015 and assigned
Florida document number L	.15000164736.		
This amendment is submitte	ed to amend the followin	ng:	
A. If amending name, <u>ent</u>	er the new name of the	limited liability company here:	
The new name must be distinguis	shable and contain the words	"Limited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal office			
(Principal office address M	<u>IUST BE A STREET A</u>	DDRESS	
			
Enter new mailing addres	e if applicable:		
(Mailing address MAY BE		<u> </u>	
TATA MANAGE MANAGERIA - APAR		••	
B. If amending the registered agent and/or th		registered office address on our records	, enter the name of the r
Name of New Reg	ristered Agent:		
<u>New Registered O</u>	ffice Address:		
		ş	
	-	,,,,	Zip Code
New Registered Agent's Sig	nature, if changing Regis	City tered Agent:	Lip Cour
		ent and agree to act in this capacity. I fur	they arrea to comply with
provisions of all statutes r	elative to the proper a	nd complete performance of my duties, an	d I am familiar with and
		ed agent as provided for in Chapter 605, 1 stered office address, I hereby confirm tha	
company has been notified			3 5 1
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		If Changing Registered Agent, Signature of	TNew Registered Agent
		Page 1 of 3	STAT
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PAGE 04/05

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

4150002350983 MGR = Manager AMBR = Authorized Member Title Name Address Type of Action MGR Mark Sumner 4701 NE 36th Avenue Ocala, Florida 34479 * Add Remove Change MGR Don Brown Sumner, II 4701 NE 36th Avenue Ocala, Florida 34479 × Add D Remove D Change _ 🖾 Add C Remove Change Add Remove Change 🗖 Add Remove 2815 SHO SHO D Change ŝ <u>_____</u>[71] TAR B OF S \triangleright Remove ÷ DRID **8** > H150002350983 Page 2 of 3

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	Date	ed Sept 30			
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1			Typed or printed name of signee		0
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