Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ROBLES NESTEGG-MH, LLC

Certificate of Status Û Certified Copy 0 04 Page Count, **Estimated Charge** \$25.00

OCT 23 2015

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COVER LETTER

Division of Co			
ROBLES	NESTEGG-MH, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Rebecca F. Emmons, Esq.		
•		Name of Person	·
	Stewart, Evans, Stewart &	Emmons, P.A.	
		Firm/Сотрану	
	2911 Cardinal Drive		
•		Address	
· · · · · · · · · · · · · · · · · · ·	Vero Beach, FL 32963		
		City/State and Zip Code	
	rfemmons@st-ev.com E-mail address: (to be used for future annual report notific	eution)
For further information of	concerning this matter, please co		
Ronda Booth		772 579-1920	
Name	ol' Person	Area Code Daytime	elephone Number
Enclosed is a check for t	he 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 Tullahassee, 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

ROBLES NESTEGG-MII, LLC		
(Name of the Limited Liability Compa- (A Florida Limited L	i <mark>v as it now ambears on our r</mark> iability Company)	ecords.)
The Articles of Organization for this Limited Liability Company	over Glad on October 5, 2	015 and assigned
	wore med on	and assigned
Florida document number L15000169096	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
VERO NESTEGG-MH, LLC		
The new name must be distinguishable and contain the words "Limited Liubili	ly 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)		
Interior with east 10214 BE 71 TOUT G11 TOU BONY		· ·
		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		orus, ester the man or the de
New Registered Office Address:		
New Registered Office Address	Enter Florida street au	ddreas
		, Florida
······································	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
	· · · · · · · · · · · · · · · · · · ·	> C 41
I hereby accept the appointment as registered agent and agre	e to act in this capacity,	I further agree to comply with the
provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p	rerjormance of my autie.	s, ana i am jamuiar with ana ias FS Or if this document is
being filed to merely reflect a change in the registered affice (address. I hereby confirm	n that the limited liability
company has been notified in writing of this change.	,	ES ES CAPIT
		語名
		DE R
If Chan	ing Registered Agent, Signat	ture of New Registered Agent
Page 1	of 3	1.51 ÷

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

	**		
<u>Title</u>	Name	<u>Address</u>	Type of Action
		***************************************	□ Add
			□ Remove
		·	Change
			D Add
, .			□ Remove
			□ Change
· ·			□ Add
			□ Remove
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•			A o 29 Remove

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	A 9:
	10 P 9
fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of the: If the date inserted in this block does not meet the applicable state cument's effective date on the Department of State's records.	(optional) filling or more than 90 days after filling.) Pursuant to 605.0 utory filling requirements, this date will not be listed
record specifies a delayed effective date, but not an eff The 90th day after the record is filed.	fective time, at 12:01 a.m. on the earlier

Typed or printed name of signee