

L15000197527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

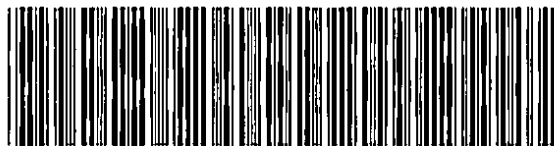
Certified Copies ☒

Certificates of Status ☒

3.17.21

Special Instructions to Filing Officer:

Office Use Only



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2021 SEP 20 PM 9:06

RECEIVED

2021 SEP 20 PM 3:35

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

cc/ccs
Ahund

SEP 21 2021

I ALBRITTON

DEPARTMENT OF STATE
ACCOUNT FILING COVER SHEET

Account Number FCA000000017

Date:

9-20-21

Requestor Name: Carlton Fields

Address: Post Office Drawer 190
Tallahassee, Florida 32302

Telephone: (850) 513-3619 - direct
(850) 224-1585

Contact Name: Kim Pullen, CP, FRP

AUTHORIZED AMOUNT TO
DEDUCT FROM ACCOUNT

\$ 60.00

Corporation Name:

Atwater Apartments
Phase Two, LLC

Email Address:

Entity Number:

L15000197527

Authorization:

Kim Pullen

X ^{4th} Amendment
Certified Copy

X Certificate of Status

 New Filings

 Plain Stamped Copy

 Annual Report

 Fictitious Name

X Amendments

 Registration

(X) Call When Ready

(X) Call if Problem

() After 4:30

(X) Walk In

() Will Wait

(X) Pick Up

CF Internal Use Only

Client 23271 Matter 81317

Name N. Liman Office TLH

**FOURTH AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
ATWATER APARTMENTS PHASE TWO, LLC**
(Name of Limited Liability company as it now appears on our records)
(A Florida limited Liability Company)

2021 SEP 20 PM 9:06
FILED

The Articles of Organization for this Limited Liability Company were filed on November 30, 2015 and assigned Florida document number L15000197527

This amendment is submitted to amend the following:

A. If amending name, new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

Name 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

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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

SEE PAGE 4

E. Effective date, if other than 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 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: September 20 2021.

See Attached

Signature of a member or authorized representative of a member

Typed or printed name of signer

Revise the current members in Article 11 to read as follows:

MANAGER/MEMBER:

Tavares Equity Investors Phase Two, LLC, a Florida limited liability company

MEMBERS:

Jeffrey Cagan

Robert M. Hickey, Living Trust

Bryan Cagan, as Grantor for BZC Revocable Trust

Joseph M. Gottesman as Trustee of the Joseph M. Gottesman Revocable Trust dated July 2, 2019

Robert Falese

Michael Daniels, MMD Family Limited Partnership

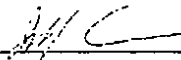
William J. Deas Self-Directed Traditional IRA The Preferred Legacy Trust Company, Custodian

Robyn Cagan

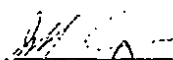
Executed in several counterparts.

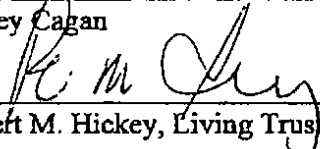
MANAGER/MEMBER:

Tavares Equity Investors Phase Two, LLC,
a Florida limited liability company

By: 
Jeffrey Cagan, As Its Sole Manager

MEMBERS:


Jeffrey Cagan


Robert M. Hickey, Living Trust


Bryan Cagan, as Grantor for BZC
Revocable Trust