

U600000695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

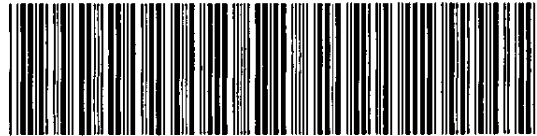
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
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FEB 19 2016

S. YOUNG

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 981753 8078162

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : January 29, 2016

ORDER TIME : 2:54 PM

ORDER NO. : 981753-005

CUSTOMER NO: 8078162

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TALLAHASSEE, FLORIDA

DOMESTIC AMENDMENT FILING

NAME: EMPRESS COMMUNITY DEVELOPMENT  
LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Empress Community Development 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:

Dannielle Johnson  
Name of Person

Empress Community Development  
Firm/Company

5827 Gypsum Pl.  
Address

West Palm Beach FL 33413  
City/State and Zip Code

dannielle.20johnson@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dannielle Johnson at (561) 541-5620  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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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TALLAHASSEE, FLORIDA

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

Empress Community Development 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 February 13, 2016 and assigned Florida document number L16000006195.

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 end with the words "Limited Liability Company," the designation "LLC," or the abbreviation "LLC."

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:

*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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>                      |
|--------------|---------------|---------------------------|--|
| AMBR         | Cliffon Brown | 5527 Gypsum PL.           | <input type="checkbox"/> Add               |
|              |               | West Palm Beach Fl. 33413 | <input checked="" type="checkbox"/> Remove |
|              |               |                           | <input type="checkbox"/> Add               |
|              |               |                           | <input type="checkbox"/> Remove            |
|              |               |                           | <input type="checkbox"/> Add               |
|              |               |                           | <input type="checkbox"/> Remove            |
|              |               |                           | <input type="checkbox"/> Add               |
|              |               |                           | <input type="checkbox"/> Remove            |
|              |               |                           | <input type="checkbox"/> Add               |
|              |               |                           | <input type="checkbox"/> Remove            |
|              |               |                           | <input type="checkbox"/> Add               |
|              |               |                           | <input type="checkbox"/> Remove            |
|              |               |                           | <input type="checkbox"/> Add               |
|              |               |                           | <input type="checkbox"/> Remove            |

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

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated February 13, 2016.



Signature of a member or authorized representative of a member

Dannielle A Johnson

Typed or printed name of signee

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