11600037123

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800321194328

11/30/18--01016--027 **60.00





COVER LETTER

TO:	Registration So Division of Con		•		
eub ie.		operties, LLC			
SUBJE	u:				
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please n	cturn all correspo	ondence concerning this matter	to the following:		
		Christine Diane Hall			
			Name of Person		
			Firm/Company		
	800 West Pine Street				
		_	Address		
		St. George Island, Florida	32328		
			City/State and Zip Code		
		E-mail address: (to be used for future annual report notific		
For furtl	ner information c	oncerning this matter, please c	all:	2	
Christin	e Diane Hall		at 38(p) 590	3412	
	Name o	f Person	Area Code Daytime T	Telephone Number	
Enclosed	d is a check for th	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 Tallahassee, 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

CK 454 Properties, LLC (Name of the Limited L	iability Compan	ny as it now appears on our reco	rds.)		
(A F	lorida Limited L	iability Company)			
The Articles of Organization for this Limited Liabil	were filed on February 22, 20	February 22, 2016		and assigned	
Florida document number L16000037123	·•				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	limited liabi	lity company here:			
The new name must be distinguishable and contain the words	"Limited Liabili	ty Company," the designation "L.I.	.C" or the abbr	eviation "L	L.C."
Enter new principal offices address, if applicable	: :	800 West Pine Street	 مر	22	
Principal office address MUST BE A STREET A	DDRESS)	St. George Island, Florida 32	328	. <u>Z</u>	
				<u>. ~</u>	62323
Enter new mailing address, if applicable:		800 West Pine Street		0 74	} ! !====
Mailing address MAY BE A POST OFFICE BOX	<u>v</u> 2	St. George Island, Florida 32			
			:	ू।' प्र	
3. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	registered off address here	:	ds, <u>enter th</u>	e name	of the
	00.111 . 111 . 0	· - ·			
New Registered Office Address:	00 West Pine S	treet Enter Florida street addre	PXV		
S	t. George Island		lorida <u>3232</u>	8	
	-	City , r	IOTIGA	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.

H 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>	Address	Type of Action
MGR	Christine Diane Hall	800 West Pine Street	
			Add
		St. George Island, Florida 32328	□ Remove
			□ Change
MGR	Kenneth A. Hall	23478 Highway 129	□ Add
		O'Brien, Florida 32071	
		11-77-18-2-1	Remove
			☐ Change
			
			□ Remove
			Change Fig.
		·	Add
			≅ Bemove
			☐ Change
			
			Remove
			☐ Change
			Add
			□ Remove
			Change

	· · ·	
		
		
	Pr (c)	
	<u></u>	NCV
	<u> </u>	30
	<u></u>	
· · · · · · · · · · · · · · · · · · ·		
	변경: 일급:	`
Iffective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or mo Note: If the date inserted in this block does not meet the applicable statutory filing locument's effective date on the Department of State's records.	(optional) ore than 90 days after filing.) Pursua requirements, this date will no	unt to 605 0207
e record specifies a delayed effective date, but not an effective ti The 90th day after the record is filed.	me, at $12:01$ a.m. on the	earlier of
Dated 11/210 . 2018.		
Signature of a member or authorized representative of	of a member	

Page 3 of 3

Filing Fee: \$25.00