

216000038123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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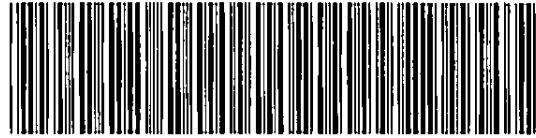
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TALLAHASSEE, FLORIDA

OCT 10 PM 00

FILED

D. SCOTT

OCT 12 2017



# HARRISON SALE McCLOY

Panama City | Santa Rosa Beach | Destin

JANE E. KERRIGAN  
jkerrigan@HSMcLaw.com  
850.650.0010

CORRESPONDENCE  
35008 Emerald Coast Pkwy, Suite 500  
Destin, FL 32541

October 5, 2017

**VIA REGULAR U.S. MAIL**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Lone Palm on the Beach, LLC - Articles of Amendment to Articles of Organization**

To Whom It May Concern:

Please find the attached Articles of Amendment to Articles of Organization for Lone Palm on the Beach, LLC, in addition to a \$25.00 check to cover the filing fee.

Mr. Kerrigan can be reached at (850)650.0010. Please mail the letter of acknowledgement to:

Jane Kerrigan, Esq.  
Harrison Sale McCloy  
35008 Emerald Coast Parkway  
Suite 500  
Destin, FL 32541

If you have any questions, do not hesitate to contact this office.

Sincerely,

Jessica N. Campfield, FRP

JEK/JNC

Enclosures: As stated.

FILED  
2017 OCT 10 PM 4:06  
JESSICA N. CAMPFIELD

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Lone Palm on the Beach, 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:

Jane Kerrigan

\_\_\_\_\_  
Name of Person

Harrison Sale McCloy

\_\_\_\_\_  
Firm/Company

35008 Emerald Coast Parkway, Suite 500

\_\_\_\_\_  
Address

Destin, FL 32541

\_\_\_\_\_  
City/State and Zip Code

jkerrigan@hsmclaw.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jane

850

650-0010

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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

FILED  
OCT 10 2011  
TALLAHASSEE, FL

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

Lone Palm on the Beach, 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 02/23/2016 and assigned  
Florida document number L16000038123.

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 contain the words "Limited Liability 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)

50 Riverside Blvd., Apt. 20C

New York, NY 10069

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

50 Riverside Blvd., Apt. 20C

New York, NY 10069

**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:

Jane Kerrigan

New Registered Office Address:

Harrison Sale McCloy

3500B Emerald Coast Pkwy  
Enter Florida street address  
Suite 800

Destin

Florida 32541

City

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>
MGR	Cydney Hogan	50 Riverside Blvd., Apt. 20C	<input type="checkbox"/> Add
		New York, NY 10069	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Joe Hogan	50 Riverside Blvd., Apt. 20C	<input type="checkbox"/> Add
		New York, NY 10069	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

2017 OCT 19 PM 5:00  
2017 OCT 19 PM 5:00

**E. Effective date, if other than the 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.

(b) The 90th day after the record is filed.

Dated September 22 2017

Cydneꝝ Hogan

Signature of a member or authorized representative of a member

Typed or printed name of signee