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■ U4/23/19--U1U11--U25 **15U, UU

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Name Change

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COVER LETTER

Division of Corpo					
SUBJECT:	L loyd Name of Limi	Black 3, ted Liability Company	LLC		
The enclosed Articles of Ar	nendment and fee(s) are subr	nitted for filing.			
Please return all correspond	ence concerning this matter t	to the following:			
	Le	S C. Shiel	ds, Esq.		
		Name of Person Vis + Shic Firm/Company	lds, P.A.		
	685 Roy.	L Palm Beach 1	3 lvd, Suite	205	/
	Royal	Palm Beach, P City/State and Zip Code	-L 33411		旦
	E-mail address: (to	ree Shields (obe used for future annual report notifi	@aol.com	19 AP	MOISIA 3403S
For further information cond	cerning this matter, please cal	11:) APR 23	목됐
Name of Po	Shields erson	at (501) 7 93 Area Code Daytime	Telephone Number) PM 1: 39	Y OF STATE
Enclosed is a check for the f					S
□ \$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 Statu Certified Copy (additional copy is encl		

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

Lou	1d Black 3, LLC		
(Name of the Limited (A	<u>Mability Company as it now appears on our records.</u>) Florida Limited Liability Company)		
The Articles of Organization for this Limited Liab	· · ·	and assigno	ed
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the 1354 The Twelf The new name must be distinguishable and contain the work	he limited liability company here: FH Fairway, LLC ds "Limited Liability Company" the designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET)	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BC	<u> </u>		V.C.
		APR 2	
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, <u>enter</u> re address here:	_ - -	he⊃ñĕw ⊃c
		H H9	F ST
Name of New Registered Agent:		<u> </u>	15 A
New Registered Office Address:			#S
	Enter Florida street address		
-	, Florida	Zip Code	
	City	np 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 **Title** Name Address **Type of Action** _□ Add _□ Remove _□ Change _____ □ Remove _□ Change _□ Add □ Remove _□ Change □ Remove ☐ Change _□ Remove _□ Change □ Add □ Remove □ Change

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ective	date, if other than the date of filing: (optional) ive 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 605.020
effecti e: If t	ive 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
ument	's effective date on the Department of State's records.
	d anacifing a delayed affective data, but act an affective time, at 17.01
he 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
ed	HY11 19:017
	10-0502
	Signature of a member or authorized representative of a member
	Les C. Shields Esq.
	VES - 0 VICOS L34.

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Filing Fee: \$25.00