116000102479

(Re	questor's Name)	
(Ad	dress)	
(110	aicss)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
, (Bu	isiness Entity Nai	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800287671298

07/12/16--01009--022 **25.00

TALLAHTESEEF FLORID

J. HARRIS

COVER LETTER -

SUBJECT:	LM AT VALENCIA, LLC
	Name of Limited Liability Company
The enclosed Articles o	of Amendment and fee(s) are submitted for filing.
Please return all corresp	pondence concerning this matter to the following:
	Roderick Hubbard
	Name of Person
	Goldelm at Valencia, LLC
	Firm/Company
	C/O Aviana at Tuscany-OFFICE 7000 Mae Anne Ave
	Address
	Reno NV 89523
	City/State and Zip Code
	accounting@goldelm.com
	E-mail address: (to be used for future annual report notification)
For further information	concerning this matter, please call:
Vanessa	775 747-7500 at ()
Name	at () of Person Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

GOLDELM AT VALENCIAN, LLC		
(<u>Name of the Limited Liabi</u> (A Floric	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability		
Florida document number L16000102479	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
GOLDELM AT VALENCIA, LLC		
The new name must be distinguishable and contain the words "Li	imited 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 ADD	ORESS)	- T-
		34.M
		er i
Enter new mailing address, if applicable:	• 17	- E23-24
(Mailing address MAY BE A POST OFFICE BOX)	2: 25 2: 25 2: 25	المحتملات منا
	25 RGE 25	
	· · · · · · · · · · · · · · · · · · ·	
	istered office address on our records, enter the name of th	e ne
registered agent and/or the new registered office ad	dress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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>	Name	Address	Type of Action
		*MPARA - L	Add
		***************************************	□ Remove
			☐ Change
···			Add
			□ Remove
			Add
			□ Remove
			Change
		4	Add
			□ Remove
			_ □ Change
			Add
			Remove Change
			□ Remove
			☐ Change

		
	•	
ctive date, if other than the date of	f filing:	(optional)
: If the date inserted in this block does	f filing: ific and cannot be prior to date of filing or more than 90 day s not meet the applicable statutory filing requirement	(optional) s after filing.) Pursuant to 605 s, this date will not be liste
etive date, if other than the date of effective date is listed, the date must be spectified in this block does ment's effective date on the Departme	s not meet the applicable statutory filing requirement	(optional) s after filing.) Pursuant to 605 s, this date will not be liste
If the date inserted in this block does ment's effective date on the Departme	is not meet the applicable statutory filing requirement and of State's records.	s, this date will not be liste
: If the date inserted in this block does ment's effective date on the Departme	is not meet the applicable statutory filing requirement on State's records. tive date, but not an effective time, at 12:	s, this date will not be liste
If the date inserted in this block does ment's effective date on the Departme ecord specifies a delayed effect e 90th day after the record is	is not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed.	s, this date will not be liste
If the date inserted in this block does ment's effective date on the Departme ecord specifies a delayed effect e 90th day after the record is	is not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed.	s, this date will not be liste
If the date inserted in this block does ment's effective date on the Department specifies a delayed effect a 90th day after the record is a surface of the control of the c	s not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed.	s, this date will not be liste
If the date inserted in this block does ment's effective date on the Department specifies a delayed effect a 90th day after the record is a surface of the second specifies and specifies a delayed effect a 90th day after the record is a surface of the second specifies a delayed effect as the second specifies as the second specifi	is not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed.	s, this date will not be liste
If the date inserted in this block does ment's effective date on the Department specifies a delayed effect e 90th day after the record is a surface of the control of the c	s not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed.	s, this date will not be liste
If the date inserted in this block does ment's effective date on the Department second specifies a delayed effect e 90th day after the record is a signature.	s not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed.	s, this date will not be liste
If the date inserted in this block does ment's effective date on the Department second specifies a delayed effect a 90th day after the record is a signature.	s not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed. The of a member or authorized representative of a member	s, this date will not be liste
If the date inserted in this block does ment's effective date on the Department second specifies a delayed effect the 90th day after the record is a signature. Signature	s not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed. The of a member or authorized representative of a member	s, this date will not be listed.
If the date inserted in this block does ment's effective date on the Department ecord specifies a delayed effect the egoth day after the record is a signature. Signature	s not meet the applicable statutory filing requirement and of State's records. tive date, but not an effective time, at 12: filed. re of a member or authorized representative of a member Typed or printed name of signce	s, this date will not be listed.