11/28/2016



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA800000023

: (614)280-3338

Fax Number

: (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address pleasent

Email	Addrocc	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUMMERPLACE AT STUART, LLC

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## **COVER LETTER**

TO: Registration Sc Division of Cor	ction porations				
	PLACE AT STUART, LLC				
SUBJECT:					
	Amendment and fee(s) are sub indence concerning this matter				
	Alex De Stefanis				
		Name of Person		-	
		-			
•		Address			
		2016 NOV			
		·AR S	11		
	alex.lpmbiz@gmail.com	to be used for future annual report notific		V 2	-
For further information of	concerning this matter, please c	·	sanory	4.33 A 8	
Megan Salazar		925 948-1914		SS →	
Name p	f Person	Area Code Daytime	Telephone Numbe	29 DA	
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Confloate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Centifica Centifica	00 Filing Fee, difficate of Status & diffied Copy diponal copy is enclosed)	
MAD	INC ADDRESS	STREETYCOURIE	R ADDRESS:		

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

Summerplace at Stuart, LLC	
(Name of the Limited Liability Compar (A Florida Limited I.	iy as It now <u>appears on our records.)</u> iability Company)
The Articles of Organization for this Limited Liability Company Florida document number £16000134788	were filed on 07/18/2016 and assigned.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Meridian at Stuart, LLC	
The now name must be distinguishable and contain the words "Limited Liabili	ly Company," the designation, "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1038 Belcher Road-S., Largo, FL 33771
(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 here  Name of New Registered Agent:  New Registered Office Address:	1.51 Kalmus Dr., Suite A203, Costa Mes 200 92626  SSE OF A PROPERTY OF A
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete; accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	re to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is
If Chan	ging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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
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MGR	KPF Investment Management, Inc.	151 Kaimus Dr., Suite A203 Costa Mesa, CA 92626	<b>1</b> Adıl
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