

L16 000155550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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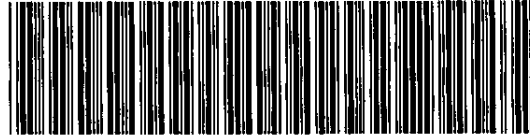
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
16 NOV - 1 PM 3:39

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Homes of Southern Charm, 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:

Thomas W. Hlavin
Name of Person

Homes of Southern Charm LLC
Firm/Company

117 N. Bay Street
Address

Eustis FL 32726
City/State and Zip Code

Karen.gibson@southerncharms.us
Karen.gibson@southerncharms.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Gibson at (352) 460-1415
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

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TALLAHASSEE, FLORIDA

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

Homes of Southern Charm, 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 8-18-2016 and assigned Florida document number L 16000155550.

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)

117 N. Bay Street
Eustis, FL 32726

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

117 N. Bay Street
Eustis FL 32726

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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:

New Registered Office Address:

117 N. Bay Street
Eustis, Florida 32726
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>
<u>mgr</u>	<u>Keri L. Slavin</u>	<u>151 W. Sterling way</u>	☐ Add
		<u>Leesburg Fl 34788</u>	☒ Remove
			☐ Change
<u>Mgr/mbr</u>	<u>Thomas W. Slavin</u>	<u>151 W. Sterling way</u>	☒ Add
		<u>Leesburg Fl 34788</u>	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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TALLAHASSEE, FLORIDA

(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)

Dated 10/28, 2016

_____, 2016.

 Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

THOMAS W. HLAVIN

Typed or printed name of signee