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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I1999000006 : (407)425-7010 Fax Number : (407)425-2747

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

I schmidt@ zkslawtiem. com Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STERLING TERRACE DEVELOPER, LLC

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## **COVER LETTER**

Division of Co			
SUBJECT: Sterling To	errace Developer, LLC		
30B/5C1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter	_	
	N. Dwayne Gray, Jr., Esq.		
		Name of Person	······································
	Zimmerman Kiser Sutcliff	c, P.A.	
		Firm/Company	
	315 E. Robinson Street, St	rite 600	
		Address	
	Orlando, FL 32801		
		City State and Zip Code	•
	dgray@zkslawfirm.com	to be used for future annual report notif	
For further information o	concerning this matter, please or	·	ication)
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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)
	ING ADDRESS:	STREET/COURING Registration Section	

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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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sterling Terrace Developer, LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number £15000160902	rility Company were filed on 08/23/2016	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	is "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	230	
registered agent and/or the new registered offic	registered office address on our records, ento	er the name of the new
Name of New Registered Agent:	والمرافقة والمستهد والمستهد والمستهد والمستهدي والمستهدي وسيسته ووي ويهي والمستهدو والمستهدوة والمستهددة	
New Registered Office Address	Con Rhold and D	
	Enter Florida street address	ORIGINAL ORI
-	, Florida _	Zip Code
	~~·/	aip oout

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

Page 1 of 3

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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	<u>Name</u>	<u>Address</u>	Type of Action
Member	James E. Dyst	1105 Kensington Park Drive	<b>≅</b> Add
		Suite 200	☐ Remove
		Altamonte Springs, FL 32714	☐ Change
			Встоуе
			□ Change
			Remove 16
			SSTAND ED
•		ROA CHÂNGO	
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Page 2 of 3

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	7-	NO <sub>V</sub>
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	E:	<b>C</b> CO
Meetive date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to  Note: If the date inserted in this block does not meet the applicate  locument's effective date on the Department of State's records.	(optional)  date of filing or more than 90 days after filing.) Pursuant of the statutory filing requirements, this date will not be	o 605.0207 (3 s listed an th
e record specifies a delayed effective date, but not The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the e	arlier of:
hated November 6 , 20th	••	,
( )		
Signature of a nember or authori	zed representative of a member	-

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Filing Fee: \$25.00