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			COVER LETTER	
	gistration Se rision of Cor		: *	•
SUBJECT:	RICHMON	D PLACE CONDO II, LLC		
SOBJECT:		Name of Lim	nited Liability Company	
The enclosed	l Anticles of .	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		SHELBY JHONSON		
			Name of Person	
		RAYBOUN MULLIGAN	, PLLC	
			Firm/Company	
		105 WEST FIFTH AVEN	UE	
			Address	
		TALLAHASSEE, FLORI	DA 32303	
			City/State and Zip Code	
		MIRANDA@CORERPM.(COM to be used for future annual report notific	ontion)
For further in	formation co	oncerning this matter, please ca	•	Sationy
SHELBY JH	IONSON		850 907-3313 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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

ARȚICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RICHMOND PLACE CONDO II, LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 9/14/2016	and assigned	
Florida document number L16000172058			
This amendment is submitted to amend the following:	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) Organization for this Limited Liability Company were filed on 9/14/2016		
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abl	breviation "L.L.C."	_
Enter new principal offices address, if applicable:	1500 FOX HOLLOW ROAD		
(Principal office address MUST BE A STREET ADDRESS)	NISAYUNA,NY 12309	<u> 16</u>	_
		SIO X	
		9F C	
Enter new mailing address, if applicable:	submitted to amend the following: ame, enter the new name of the limited liability company here: distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." pal offices address, if applicable: address MUST BE A STREET ADDRESS) g address, if applicable: MAY BE A POST OFFICE BOX) The registered agent and/or registered office address on our records, enter the name of the new ind/or the new registered office address here: New Registered Agent: istered Office Address: Enter Florida street address		
(Mailing address MAY BE A POST OFFICE BOX)	rganization for this Limited Liability Company were filed on 9/14/2016 and assigned number L16000172058 is submitted to amend the following: name, enter the new name of the limited liability company here: be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." ipal offices address, if applicable: address MUST BE A STREET ADDRESS) In a gaddress, if applicable: MAY BE A POST OFFICE BOX) The the registered agent and/or registered office address on our records, enter the name of the new and/or the new registered office address here: f New Registered Agent: gistered Office Address:		
		- 9	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		the name of the	: new
Name of New Registered Agent:			_
New Registered Office Address:	E. El II II		_
	Enter r ioriaa street address		
	, Florida	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> Type of Action Siew M. Tan MGR 1500 FOX HOllow Rd _□ Add Nisayuna, NY 12309 □ Change □ Add □ Remove ☐ Change □ Add 16 OCT - PH-2: 09 ove □ Change _□ Add □ Remove _□ Change _□ Add ☐ Remove ☐ Change

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I ffec fan e	tive date, if othe ffective date is listed,	r than the dat	re of filing:	nnot be prior to	date of filing or	more than 90 d	(optional)) Pursuant to	605 D20
Note:	If the date inserte nent's effective da	ed in this block	does not mee	t the applicab	le statutory fil	ing requireme	nts, this date	will not be	listed a
he re The	ecord specifies e 90th day afte	a delayed ef r the record	fective dat is filed.	e, but not	an effective	time, at 1	2:01 a.m.	on the ea	rlier c
Dated	September 22		:	2016					
Dateu	·		707		- ·				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00