

L16 000 191727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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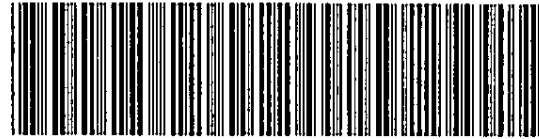
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

SEP 15 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CROSSWATER SCHOOL, 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:

Steven Greenhut

Name of Person

Balch & Bingham LLP

Firm/Company

841 Prudential Drive, Suite 1400

Address

Jacksonville, FL 32207

City/State and Zip Code

sgreenhut@balch.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Greenhut

904 348-6874
at ()

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

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

CROSSWATER SCHOOL, 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 10/17/2016 and assigned
Florida document number L16000191727

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)

830-13 A1A NORTH

UNIT 403

PONTE VEDRA BEACH, FL 32082

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

830-13 A1A NORTH

UNIT 403

PONTE VEDRA BEACH, FL 32082

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:

Balch & Bingham LLP

New Registered Office Address:

841 Prudential Drive, Suite 1400

Enter Florida street address

Jacksonville

Florida

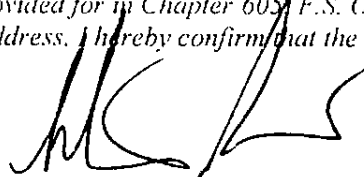
City

322

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>
AMBR	NATIONAL SAFE HARBOR EXCHANGES	60 E. RIO SALADO PARKWAY	<input type="checkbox"/> Add
		STE. 1103	<input checked="" type="checkbox"/> Remove
		TEMPE, AZ 85281	<input type="checkbox"/> Change
MGR	KSM SCHOOL II, L.L.C.	830-13 A1A NORTH	<input checked="" type="checkbox"/> Add
		UNIT 403	<input type="checkbox"/> Remove
		PONTE VEDRA BEACH, FL 32082	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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[illegible]

(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)

(b) The 90th day after the record is filed.

2017

Signature of a member or author

Signature of a member or authorized representative of a member

Kenneth Muller

Typed or printed name of signer

Filing Fee: \$25.00

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