

L16000193967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2016 DEC 19 PM 3:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
DEC 20 2016

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LANCASTER APARTMENTS 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:

MICHAEL R TILLEY

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

7999 N FEDERAL HWY SUITE 102

\_\_\_\_\_  
Address

BOCA RATON FL 33487

\_\_\_\_\_  
City/State and Zip Code

MIKE@MRTILLEY.COM

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

For further information concerning this matter, please call:

MIKE TILLEY

561 392 5707  
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**

LANCASTER APARTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**FILED**  
2016 DEC 19 PM 3:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on OCTOBER 20, 2016 and assigned  
Florida document number L16000193967.

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)

**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 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:

*Enter Florida street address*

, Florida

*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>
MGR	KVR PROPERTIES, LLC	1151 NW 116AVE	<input type="checkbox"/> Add
		CORAL SPRINGS FL 33071	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ARVIND REDDY	1151 NW 116 AVE	<input checked="" type="checkbox"/> Add
		CORAL SPRINGS FL 33071	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
 2016 DEC 19 PM 5:22  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

2018 DEC 13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
2018 DEC 19 PM 3:28  
SECRETARY OF STATE  
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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

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

Dated DECEMBER 13, 2016

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

MICHAEL R TILLEY

Typed or printed name of signee