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## **COVER LETTER**

	gistration Sec vision of Corp			
CUDICAT.	RA The Enc	lave at Cortez, LLC		
SUBJECT		Name of Limited Liability Company		
The enclose	d Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return	n all correspon	dence concerning this matter t	o the following:	
		Misty Kent		
			Name of Person	
		Royal American Companie	s	
			Firm/Company	
		1002 W. 23rd St., Ste. 400		
			Address	<del></del>
		Panama City, FL 32405		
			City/State and Zip Code	
		misty.kent@royalamerican.c	com o be used for future annual report notific	cation
For further i	information co	ncerning this matter, please ca	·	
Misty Kent			850 914-3234 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e 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:

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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

ibility Company as it now appears on our orida Limited Liability Company)	records.)
y Company were filed on 11/08/2016	and assigned
2'.	
limited liability company here:	
Limited Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
DDRESS)	
egistered office address on our re address here:	ecords, <u>enter the name of the ne</u>
Enter Florido street	address
12/1C/ 1 10/1MI 30 CC	
City	, Florida Zip Code
	Enter Florida street

## 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>	Name	Address	Type of Action
MGR	Southern Coastal Mortgage Co	1002 W. 23rd St., Ste. 400	
		Panama City, FL 32405	■ Remove
			☐ Change
MGR	Waddell Plantation, Inc.	1002 W. 23rd St., Ste. 400	■ Add
		Panama City, FL 32405	□ Remove
			☐ Change
AMBR	Southern Coastal Mortgage Co	1002 W. 23rd St., Ste. 400	Add
		Panama City, FL 32405	■ Remove
			☐ Change
AMBR	Waddell Plantation, Inc.	1002 W. 23rd St., Ste. 400	<b>∃</b> Add
		Panama City, FL 32405	
			☐ Change
			D Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

	<u> </u>
	<del></del>
	12/05/17
E. Effe	ctive date, if other than the date of filing: (optional) (optional) 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)
(it an i	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 (8) the file date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
	iment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ne 90th day after the record is filed.
	November 30 2017
Date	$d \longrightarrow 0$
	Copyllat Aller
	Signature of a member brauthorized representative of a member
	·
	Lauretta J. Pippin, Secretary

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Typed or printed name of signee

Filing Fee: \$25.00