

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GARDNER BREWER MARTINEZ-MONFORT, P.A.
Account Number : F20060000058
Phone : (813) 221-9600
Fax Number : (813) 221-9611

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MULTI-FAMILY CONSTRUCTION BAYSHORE, LLC**

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MULTI-FAMILY CONSTRUCTION BAYSHORE, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher W. Brewer

Name of Person

Gardner Brewer Martinez-Monfort, P.A.

Firm/Company

400 North Ashley Drive, Suite 1100

Address

Tampa, FL 33602

City/State and Zip Code

cbrewer@gbmmlaw.com

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

For further information concerning this matter, please call:

Christopher W. Brewer

813

221-9600

at ()

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E145 (2/14)

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AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

FIRST: The name of the limited liability company is: MULTI-FAMILY CONSTRUCTION BAYSHORE, LLC,
a Florida limited liability company

SECOND: The Florida Document number of the limited liability company is: L16000215114

THIRD: The street address of the limited liability company's principal office is:

10 BROWN ST.NEWNAN, GA 30263-2031

The mailing address of the limited liability company's principal office is:

P.O. BOX 1038NEWNAN, GA 30264-1038

FOURTH: The date the statement of authority became effective is: July 20, 2017

FIFTH: The statement of authority is cancelled.

OR

The amendment to the statement of authority is

Jeffrey H. Turner is hereby removed as an Authorized Person.

Edward Conn Crabtree and J. Littleton Glover, Jr. are each hereby designated as an

Authorized Person, with full power and authority to act for and bind the company.


Signature of authorized representative

J. Littleton Glover, Jr.
Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

CR2E145 (2/14)

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