## 11700001241

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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Office Use Only



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## **COVER LETTER**

Division of Corpo	rations		
SUBJECT: HERITA		GROUP LLC	
	Name of Limite	ed Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are subm	itted for filing.	
Please return all correspond	lence concerning this matter to	the following:	
	Prop	ZEEVW	
	102.00	Name of Person	<del></del>
		Firm/Company	
	0812 B	1 2101 - 7:-15	
	8813 BA	Y 2104E BLYD Address	<del></del>
	ORLAHBO	City/State and Zip Code	
		City/State and Zip Code	
	BZEEUW	be used for future annual report notification	
;	E-mail address: (to	be used for future annual report notifical	tion)
For further information con-	cerning this matter, please call	l:	
	) <b>-</b>	167 250	. 7
BARRY D. Z	EEOM7	at (407) 257  Area Code Daytime To	elephone Number
IVAINE OF I	CISOII	Area code Dayime re	Siephone 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	\$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

HERTTAGE !			LLC	
(Name of the Limited	Liability Company a Florida Limited Liabi	s it now appears on llity Company)	our records.)	
The Articles of Organization for this Limited Lial	oility Company we	re filed on		and assigned
Florida document number				
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability	company here:		
The new name must be distinguishable and contain the wor	ds "Limited Liability (	Company," the design	nation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:			
(Principal office address MUST BE A STREET	ADDRESS)			300
				<b>59 3</b> 34
				EST N
Enter new mailing address, if applicable:				A 2
(Mailing address MAY BE A POST OFFICE B	<u>ox)</u> _			9.0
				TO ST
				<b>6 5</b>
B. If amending the registered agent and/or	registered office	address on ou	r records, <u>ent</u>	er the name of the nev
registered agent and/or the new registered office	<u>ce address here</u> :			• •
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 **Type of Action Title** <u>Address</u> <u>Name</u> HERITAGE INVESTMENT 8813 BAY RIDGE BWD MGL PARTNERS LLC 0124AUDO 1FL 32819 □ Remove ☐ Change HERTIAGE PROPERTY MGR MANAGEMENT LLC □ Add BBIS BAY RIOHE BLYD DELIDADO 32819 -E Remove ☐ Change □ Add ☐ Change □ Add ☐ Remove \_□ Change ☐ Add ☐ Remove \_□ Change

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E ffor	tive date, if other than the date of filing: $05-01-17$ (optional)	<b>≥</b> ≥	•
lfane	frective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) P	ur <b>9ba</b> nt to	605.020
Note	If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi	li not be	listed a
docu	nent's effective date on the Department of State's records.		
he re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on	the ea	rlier o
	e 90th day after the record is filed.		
	105-17-17		
D			
Dated	1.05-17-17		
Dated			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00