# L17000024341

(Re	equestor's Name)	-
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone #	<del>f)</del>
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(Bu	siness Entity Name	<u>s)</u>
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SECRE JARY OF STATE TALLAHASSEF, FLORING

2017 MAR 13 PM 1: 3

K. SALY MAR 1 4 2017

# **COVER LETTER**

	egistration Section egistration Section					
SUBJECT	·	Bis	San Jame of Limite	Proper Lies	440	<u>-</u>
		•	value of Ellina	od Endomity Company		
The enclose	ed Articles of Ame	endment and fee	e(s) are subm	itted for filing.		
Please retur	rn all corresponder	nce concerning	this matter to	the following:		
		_	James	Name of Person	ds	
	-			Name of Person		
			Big :	Sun Propert	ies L	LC_
	-		~2	Firm/Company		·
	_		1480	SE 73RD	Pl	
	-			Address		
	_		Ocala	City/State and Zip Code	480	
			Λ Λ Λ	City/State and Zip Code		
	_	<u>j</u> e	Jward≤do	be used for future annual re	enort notification	on)
For further	information conce				oport nounous	on,
	James E	Elwards	5	at ( 3 ≤ → ) Area Code	427-25	948
	Name of Per	son		Area Code	Daytime Tele	ephone Number
Enclosed is	a check for the fo	llowing amount	<b>:</b>			
\$25.00	Filing Fee	\$30,00 Filing Certificate o		□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		□ \$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

# TO **ARTICLES OF ORGANIZATION** OF

ARTICLE	S OF ORGANIZAT	HUN	A second
	OF		11/1/11/11
Big :	Sun Properties  Ility Company as it now appear da Limited Liability Company)	للا	2017 MAR 13 PM 1:33
(Name of the Limited Liab	lity Company as it now appear	s on our records.	DALI YEMO 1:30
(111)	du Diinteel Didonity Company)		MASSEDEST
The Articles of Organization for this Limited Liability	Company were filed on	Jan 31	,2017 and assigned
Florida document number 1700002434	<u>1</u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the d	esignation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADL	RESS)		
Enter new mailing address, if applicable:			
• • •			
(Mailing address MAY BE A POST OFFICE BOX)			
	<u> </u>	<del> , , , , , , , , , , , ,</del>	
B. If amending the registered agent and/or reg	istered office address on	our records,	enter the name of the new
registered agent and/or the new registered office ad	dress here:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	da street address	
		¥73	<b>:</b> _
	City	, Flor	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

### or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Cathy J. Edwards	1480 SE 13 RD P1	Add
		Ocala, F1 34480	Remove
			Change
			Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
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(If an effecti Note: If 1	date, if other than the date of filing:
the recor ) The 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: otherwise the record is filed.
Dated	March 8 , 2017
	Somes & Elwards
	Signature of a member or authorized representative of a member
	James E Edwards
	Typed or printed name of signee

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Filing Fee: \$25.00