

L17000025603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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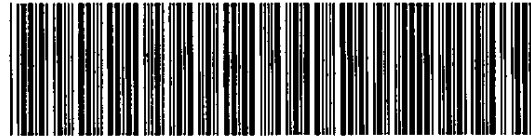
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

4/23/18

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: KURVIN GOLD RESIDENTIAL, 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:

Alicia J. Kurvin
Name of Person
Kurvin Gold Residential
Firm/Company
2553 Britanna Rd
Address
Sarasota, FL 34231
City/State and Zip Code
AUCIAJKURVIN@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AUCIA J. KURVIN at (941) 539 1443
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

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2018 APR 20 P 2:43
TALLAHASSEE, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

KURVIN GOLD RESIDENTIAL, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 2/1/2017 and assigned
Florida document number L17000025803

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Kurvin Residential, LLC

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)

#18 4141 S Tamiami Trail
Sarasota, FL
34231

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

#18 4141 S Tamiami Trail
Sarasota, FL
34231

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

City

Florida

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>
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 18 APR 20
 TAMPA
 FLORIDA

210 APR 21 1964
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21ND APR 20 P 2:41
CLERK OF DISTRICT COURT
OKLAHOMA
Pursuant to 605.0207
this date will not be listed as

Filing Fee: \$25.00