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O SIMMONS FEB 2 0 2017

## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT:	3635 Wh Name of Limi	HTSPER CREEK ited Liability Company	BLVD LLC
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Ma	Name of Person	
		Firm/Company	
	1934	ST GEORGE C	T
	IIM	DLEBURG FU 3 City/State and Zip Code	32068
	Maggle W E-majladdress: (i	nthe 140 yahoo. C	cation)
For further information co	ncerning this matter, please ca	<b>J</b>	
Mary Name of	Whitney Person	at (904) 294 Area Code Daytime	~ 1025 U 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:**

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

	3635	WHISPER	CREEK	RLVD	LLC		
	( <u>Name</u>	of the Limited Liability Co (A Florida Lim	ompany as it now app ited Liability Compan	ears on our reco	ords.)	-	
	of Organization for this		nany were filed on	2/06/	2017	_ and assigned	
This amendn	nent is submitted to ame	nd the following:					
A. If amend	ling name, <u>enter the ne</u>	w name of the limited	liability company	here:			
						墨口	
The new name	must be distinguishable and	contain the words "Limited I	Liability Company." th	e designation "L	LC" or the abbre	viation "[T.C."	
Enter new p	rincipal offices addres	s, if applicable:		··· · · ·			
(Principal of	fice address MUST BE	A STREET ADDRESS	<u> </u>				
						့ မ	
Enter new n	nailing address, if appl	icable:	<del></del>				
(Mailing add	<u>lress MAY BE A POST</u>	OFFICE BOX)		···			
			<del></del>				
	nding the registered a gent and/or the new re			on our reco	rds, <u>enter th</u>	e name of the new	
,		Albitor our ottree water one		•			
<u>Na</u>	me of New Registered A	gent:					
Ne	w Registered Office Add	fress:					
<u> </u>			Enter Florida street address				
				,	Florida		
			City			Zip Code	
New Register	ed Agent's Signature, if	changing Registered Ag	ent:				
provisions of accept the of being filed t	ept the appointment as of all statutes relative to bligations of my positi o merely reflect a char as been notified in writi	o the proper and comp on as registered agent age in the registered oj	lete performance as provided for it	of my duties, n Chapter 60.	and I am fan 5, F.S. Or, if	niliar with and this document is	

If Changing Registered Agent, Signature of New Registered Agent

为1800年1900年1900年1月1日

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>	Address .	Type of Action
MBR	christopher Whitney	1934 ST GEORGE CT	<b>t</b> Add
	)	1934 ST GEORGE CT MIDDLEBURG, FL 320	Remove
			Change
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n effective date is l te: If the date in	other than the disted, the date must be serted in this blocked date on the Dep	e specific and k does not m	cannot be prineet the appl	or to date of fi icable statute	ling or more	than 90 days	after filing.)		
record specif he 90th day	ies a delayed e after the recor	effective ded is filed.	ate, but r	ot an effe	ctive tim	e, at 12:(	)1 <b>a</b> .m. o	n the earlie	r of
ed Feb	18	·	2617	•					
•	1								

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Filing Fee: \$25.00