

L17000035063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

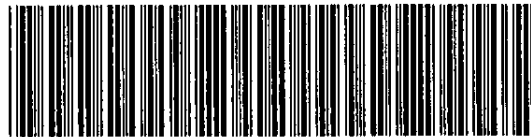
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000297353880

04/19/17--01024--017 **25.00

FILED
17 APR 19 AM 11:46
04/19/2017 11:46 AM

O SIMMONS
APR 20 2017



**BYRD
CAMPBELL**

ORLANDO • DALLAS • PENSACOLA

April 17, 2017

Division of Corporations
Registration Section
Clifton Bldg.
2661 Executive Circle
Tallahassee, FL 32301

RE: Moonraker (FL) 2017, LLC

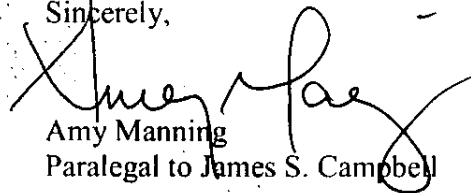
Dear Sir or Madam:

Please find enclosed a Articles of Amendment to Articles of Organization along with our check #30079, in the amount of \$25, which represents the filing fee. Once filed, please return a copy of the filing to me by Federal Express, using the prepaid label, to the address below.

Amy Manning
6112 Jameson Circle
Pace, FL 32571

Thank you for your assistance in this matter.

Sincerely,



Amy Manning
Paralegal to James S. Campbell

/alm

Enclosures

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

MOONRAKER (FL) 2017, 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 February 13, 2017 and assigned
Florida document number L17000035063.

This amendment is submitted to amend the following:

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

68V Moonraker (FL) 2017, 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

_____, 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Fortuna Investments, L.L.C.	29891 Woodrow Lane, Suite 300	<input type="checkbox"/> Add
		Spanish Fort, AL 36527	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nathan L. Cox	29891 Woodrow Lane, Suite 300	<input checked="" type="checkbox"/> Add
		Spanish Fort, AL 36527	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Charles T. Gross, Jr.	29891 Woodrow Lane, Suite 300	<input checked="" type="checkbox"/> Add
		Spanish Fort, AL 36527	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	James W. Lowery	29891 Woodrow Lane, Suite 300	<input checked="" type="checkbox"/> Add
		Spanish Fort, AL 36527	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

11 APR 19 11:14
REC'D

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED
17 APR 19 AM 11:49

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated April 13, 2017

Jeffery Bahnser
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Jeffery Bahnsen

Typed or printed name of signee