## 17000038603

(R	tequestor's Name)	
(A	ddress)	
(A	address)	
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	······································
(C	Pocument Number)	
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## **COVER LETTER**

TO:		istration Sec ision of Corp			
SUBJE	·CT·	TARRAGO	NA LLC		
SODJE	2C 1.	-	Name of Lim	ited Liability Company	<del></del>
The en	closed	l Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return	all correspon	ndence concerning this matter	to the following:	·
			Yvesley Francois		
				Name of Person	
			TARRAGONA LLC		
				Firm/Company	
			17070 Washington Street a	apt 105	
				Address	
			Pembroke Pines, Florida 3	3025	
				City/State and Zip Code	
			fyvesley@yahoo.com		·
			E-mail address: (	to be used for future annual report noti	fication)
For fur	ther in	nformation co	oncerning this matter, please ca	all:	
Yvesle	ey Fra	ncois		786 597-0740	
		Name of	f Person	at () Area Code Daytim	e Telephone Number
Enclos	ed is a	a check for th	ne following amount:		
<b>=</b> \$2:	5.00 F	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

TARRAGONA 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  $\frac{02/17/2017}{1}$ and assigned Florida document number L17000038603 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: EAST GOLF DRIVE 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 registered agent and/or the new registered office address here: -12 Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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fective date, if other than the date of filing: neffective date is listed, the date must be specific and cannot be prior to date of the date of	filing or more than 90 days after filing.) Pursuant to 605
ote: If the date inserted in this block does not meet the applicable statu cument's effective date on the Department of State's records.	itory filing requirements, this date will not be list
record specifies a delayed effective date, but not an effective date date, but not an effective date date, but not an effective date date date date date date date dat	ective time, at 12:01 a.m. on the earli
The 90th day after the record is filed.	
nted,	
,	resentative of a member
1	

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Typed or printed name of signee

Filing Fee: \$25.00