

Apr. 25. 2017 6:20PM
4/26/2017

BRETT HENDEE, P.A. 813-259-1106
Division of Corporations

No. 6451 P. 1

L17000048690

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BRETT HENDEE, P.A.
Account Number : T19980000066
Phone : (813)258-1177
Fax Number : (813)259-1106

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: handwreality@gmail.com

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DIVISION OF CORPORATIONS
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FENSALIR HOMES II, LLC

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TALLAHASSEE, FLORIDA

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APR 27 2017
HARRIS

Apr. 25. 2017 6:21PM BRETT HENDEE, P. A. 813-259-1106

No. 6451 P. 2

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FENSALIR HOMES II, 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:

WALLACE G. WILKERSON, II

Name of Person

FENSALIR HOMES II, LLC

Firm/Company

701 S. HOWARD AVE., STE 106-533

Address

TAMPA, FL 33606

City/State and Zip Code

HANDWREALTY@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WALLACE G. WILKERSON, II

813

235-5685

at ()

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

FENSALIR HOMES II, 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 MARCH 6, 2017 and assigned
Florida document number L17000048690 LE

This amendment is submitted to amend the following:

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

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

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

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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>
MGR	WALLACE G. WILKERSON, II	701 S. HOWARD AVE., #106-533	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33606	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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17 APR 25 AM 03
CLERK OF SUPERIOR COURT
JUDICIAL CIRCUIT IN AND FOR
THE SEVENTH JUDICIAL CIRCUIT
TAMPA, FLORIDA

No. 6451 P. 5

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

10

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.

Dated APRIL 25

2017

Signature of a member or authorized representative of a member

WALLACE G. WILKINSON, II, MANAGER

Typed or printed name of signer

FILED
CLERK OF DISTRICT COURT
17 APR 26 AM 10:05

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