L17000063160

(Requestor's Name)
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C. GOLDEN JUN 2 7 2019

COVER LETTER

	Registration So Division of Cos			
SUBJEC	Bowles TL	•		
300000	-1,		nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Robert Wolf		
		Eden Roc Properties, LLC	Name of Person	
			Firm/Company	
		3944 W. Eden Roc Circle		
		T FL 32/24	Address	
		Tampa, FL 33634	Ciriforn and T. C. I	
		bob@edenrocproperties.com		
For furth	er information e	E-mail address: (oncerning this matter, please of	to be used for future annual report notifiall:	cation)
Margaret	t Bowles		813 220-8440	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
\$ 25.0	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**

2019 JUH 17 PM 6: 27

Bowles TL, LLC

(Name of the Limi	ted Liability Compar (A Florida Limited L	ıy a s it now app iability Company	ears on our records.)	12	ištai)	
The Articles of Organization for this Limited L Florida document number L17000063160		were filed on	03/20/2017		and assigned	
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name o	f the limited liabi	lity company	<u>here</u> :			
The new name must be distinguishable and contain the v	vords "Limited Liabili	ty Company." th	e designation "LLC" or	the abbrev	iation "L.L.C."	
Enter new principal offices address, if applic	able:					
(Principal office address MUST BE A STREE	ET ADDRESS)					
Enter new mailing address, if applicable:		PO Box 2524				
(Mailing address MAY BE A POST OFFICE BOX)		Fraser, CO 80442				
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	or registered off	ice address	on our records, <u>e</u>	iter the	name of the new	
•	4022 W. Cuman	54	-			
New Registered Office Address:	4923 W. Cypres		lorida street address		·	
	Tampa	City	, Florida		lin Code	
New Registered Agent's Signature, if changing I	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>	Address	Type of Action
MGR	Eden Roc Properties, LLC	3944 W. Edon Roc Circle, Tampa, FL 33634	Add
			Remove
			Change
			Remove
			□ Change
			□ Remove
			Change
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an effecti	ve date is liste	d, the date mu	e date of fili est be specific a	nd cannot be	prior to date of	filing or more th	optie an 90 days after	filing.) Pursuant (o 605.0207
						atory filing req		s date will not b	e listed as
e recor	d specifie:	s a delaye	d effective	date, but	not an eff	fective time	, at 12:01 a	a.m. on the e	arlier o
The 90	Oth day af	ter the re	cord is filed	1.					
ated	June			. 201	19				
,	T -///	au ami	A 65	mlu					
		1	Signature of	a member or	authorized rep	resentative of a	memb er		_
		//							

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Filing Fee: \$25.00