

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BRENNAN, MANNA & DIAMOND, P.L.

Account Number : 120040000104 : (904)366-1500 Phone : (904)366-1501 Fax Number

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

Email Address: Cawalker

LELC AMND/RESTATE/CORRECT OR M/MG RESIGN OPTIMUM REI, LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe PAGE 01/04

6/28/2017 98:12 2102/22/90

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OPTIMUM REI, LLC		
(Name of the Limited	Liability Company as it now appears on our Florida Limited Liability Company)	records.
The Articles of Organization for this Limited Lia	bility Company were filed on 03/28/2017	and assigned
Florida document number L17000070279	'	
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
•		
Enter new mailing address, if applicable:		
(Malling address MAY BE A POST OFFICE B	<u> </u>	>=
B. If amending the registered agent and/o	r registered office address on our r	ecords, enter the name of the n
registered agent and/or the new registered offi	ce address here:	
	•	
Name of New Registered Agent:		
New Registered Office Address:		<i></i>
	Enter Florida stree	t address
		, Florida
	Citv	Zip Code

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

Page 1 of 3

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 = M AMBR = A	lanager authorized Member	"n <u>i</u>	
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Jones, Clay	3030 Piedmont Manor Dr.	
		Orange Park, FL 32065	■ Remove
			☐ Change
AMBR	Duvel Homes, LLC	1080 Edgewood Ave S, Suite 6	■ Add
		Jacksonville, FL 32205	□ Remove
			☐ Change
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Page 2 of 3

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record specifies a del The 90th day after the	ayed effective record is filed	 date, but no	t an effective	time, at 12:0)1 a.m. on t	he earli	er of:
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Of-	Signature of a	member or autho	rized representati	ve of a member	······		

Page 3 of 3

Filing Fee: \$25.00