

4/5/2017

5. 2017 1:13PM

Zimmerman, Kiser, & Sutcliffe, P.A.  
Division of Corporations

6. 0517 P

L17000072507

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

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Account Number : I19990000006  
Phone : (407)425-7010  
Fax Number : (407)425-2747

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Email Address: sbaker@zkslawfirm.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BROOKSTONE AUDUBON, LLC

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BROOKSTONE AUDUBON, 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:

D. Scott Baker, Esq.

Name of Person

Zimmennan Kiser Sutcliffe, P.A.

Firm/Company

315 E. Robinson Street, Suite 600

Address

Orlando, FL 32801

City/State and Zip Code

SBaker@zkslawfirm.com

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

For further information concerning this matter, please call:

D. Scott Baker, Esq.

at ( 407 ) 425-7010

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

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☐ \$55.00 Filing Fee &  
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☐ \$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**

**BROOKSTONE AUDUBON, 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 30, 2017 and assigned Florida document number L17000072507.

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:

2100 HOLLYWOOD BOULEVARD

(Principal office address **MUST BE A STREET ADDRESS**)

HOLLYWOOD, FL 33020

Enter new mailing address, if applicable:

2100 HOLLYWOOD BOULEVARD

(Mailing address **MAY BE A POST OFFICE BOX**)

HOLLYWOOD, FL 33020

**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:

2100 HOLLYWOOD BOULEVARD

Enter Florida street address

HOLLYWOOD

Florida 33020

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

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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>
VP	LEON J. WOLFE	2100 HOLLYWOOD BLVD	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	MARA S. MADES	2100 HOLLYWOOD BLVD	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	WILLIAM H. KASSEBAUM	2100 HOLLYWOOD BLVD	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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WASHINGTON, D.C.

17 APR - 5 AM EDT '69

**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 4 2017

Signature

Signature of a member or authorized representative of a member

LEON J. WOLFE

Typed or printed name of signee