

# L17000119775

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

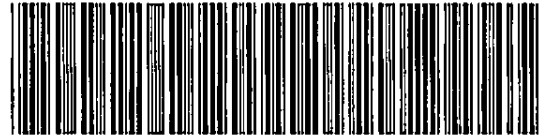
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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01/13/18--01018--019 \*\*25.00

RECEIVED  
FEB 07 2018

2018 FEB -7 11:07:07

FEB 08 2018  
J. HARRIS

Missing Signature  
COVER LETTER

TO: Registration Section  
Division of Corporations

attached

SUBJECT: GIOVANNI 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:

CHAD EUBANKS

Name of Person

GIOVANNI HOMES II LLC

Firm/Company

9220 FRONT BEACH RD

Address

PCB, FL 32408

City/State and Zip Code

jacksonwilson1972@

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

For further information concerning this matter, please call:

CHAD EUBANKS

Name of Person

850 630-6146  
at ( )  
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

already paid 1/18 m/c



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 16, 2018

CHAD EUBANKS  
1450 CANEL WAY  
PERDIDO KEY, FL 32507

SUBJECT: GIOVANNI HOMES II LLC  
Ref. Number: L17000119775

We have received your document for GIOVANNI HOMES II LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 418A00000909

2018 FEB -7 PM 7:09  
418A00000909

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

GIOVANNI HOMES II LLC

(Name of the Limited Liability Company as it now appears on all records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/31/2017 and assigned  
Florida document number L17000119775

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS!)

14050 CANALA WAY

PERDIDO KEY, FL 32507

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14050 CANALA WAY

PERDIDO KEY, FL 32507

**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 565, 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>	<u>Address</u>	<u>Type of Action</u>
AP	BRANDON JOSEPH MIMS	1229 STEPHEN MALLORY RD	<input checked="" type="checkbox"/> Add
		KEY WEST, FL 33040	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	SHAUNDA WHITESIDE	14050 CANEL A WAY	<input type="checkbox"/> Add
		PERDIDO KEY, FL 32507	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	AARON SANDQUIST	14050 CANEL A WAY	<input type="checkbox"/> Add
		PERDIDO KEY FL 32507	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

**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 02/01/2018 2018

01/2018 2018  
 Rad Eubank  
 Signature of a member or authorized representative of a member

had Eubanks  
Typed or printed name of signee

207:37 1-0192