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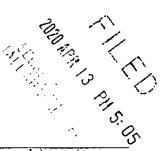
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## **COVER LETTER**

		istration Sec sion of Corp				
G110 104	om:		PLACE, LLC			
SUBJEC	٦1:		Name of Lim	ited Liability Company		<del></del>
			amendment and fee(s) are sub-			
ricase te	zun 11	an correspon	William A. Sweat, Esquire			
			William A. Sweat, P.A.	Name of Person		· · · · · · · · · · · · · · · · · · ·
			2018 South Florida Avenue	Firm/Company	_	
			Lakeland, Florida 33803	Address		<del></del>
		,	× ACIA 173	City/State and Zip Code		<u> </u>
For furth	ner in		ncerning this matter, please ca			
William	A. S	weat, Esquir	e	863 68	30-2222	
****		Name of	Person	at () Area Code	Daytime Telep	hone Number
Enclosed	l is a	check for the	e following amount:			
<b>■</b> \$25.	00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is en		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			NG ADDRESS:		T/COURIER A	DDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



GLORIA'S PLACE, 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 07/24/2017 and assigned Florida document number L17000157972 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.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1517 Hallam Court N. Enter new mailing address, if applicable: Lakeland, Florida 33813 (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: Davinia Watts-Mottley Name of New Registered Agent: 1517 Hallam Court N. New Registered Office Address: Enter Florida street address Lakeland

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

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	Davinia Watts-Mottley	1517 Hallam Court N. Lakeland, Florida 33813	■ Add
			Remove
			□ Change
MGR	Timothy P. Clay	850 Hanover Way Lakeland, Florida 33813	Add
		<del></del>	■ Remove
			☐ Change
	<del></del>		Add
			□ Remove
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fan effed <u>Note:</u> I	e date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at $12\!:\!01$ a.m. on the earlier of the day after the record is filed.
Dated _	Agric 9, 2019  Linather Class  Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member    1   1   2   7   12   7   7   7   7   7   7   7   7   7
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Filing Fee: \$25.00