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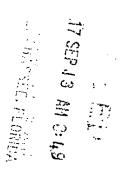
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(During Full Maria)
(Business Entity Name)
(Document Number)
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COVER LETTER

Division of Cor	porations		
LEGACY O	GROUP PALM BEACHES, LI		
	Name of Lim	ited Liability Company	
enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
ase return all correspo	ndence concerning this matter	to the following:	
	DAN MOORE		
		Name of Person	
	MARLIN GROUP MANA	GEMENT, LLC	
	 	Firm/Company	
	250 TEQUESTA DRIVE,	SUITE 200	
		Address	
	JUPITER, FL 33469		
		City/State and Zip Code	
	MARLINGRPMGMT@YA		
	E-mail address: (to be used for future annual report notifi	cation)
further information co	oncerning this matter, please ca	ail:	
AN MOORE		561 385-1429 at ()	
Name of	f Person	Area Code Daytime	Telephone Number
closed is a check for th	ne 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:

TO:

Registration Section

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

LEGACY GROUP PALM BEACHES, LI					
(<u>Name of the Limited Liat</u> (A Flor	ida Limited Liability C	ow appears on our recor ompany)	<u>(dş.</u>)		
The Articles of Organization for this Limited Liability lorida document number L17000185286	Company were file	ed on AUGUST 30, 20)17	and assi	gned
his amendment is submitted to amend the following:					
a. If amending name, enter the new name of the li	mited liability com	pany here:			
he new name must be distinguishable and contain the words "L	imited Liability Compa	any," the designation "LL	C" or the abbrev	riation "L.L	.C."
Enter new principal offices address, if applicable:		EQUESTA DRIVE			
Principal office address MUST BE A STREET ADDRESS)	DRESS) SUITE	200			
	JUPIT	ER, FL 33469			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered agent and/or the new registered office ac		iress on our record	is, enter the	name o	f th
Name of New Registered Agent: RO	BERT C. HACKNEY	7	<u> </u>	7. SEP	
New Registered Office Address: 250	TEQUESTA DRIVE		79 79 77	હ	
		Enter Florida street addre		77.5	77
JUP	ITER	, F	lorida 33469	g,	Sirrium
	City			Zip Côde	

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

Page 1 of 3

ह्यापाठाव्या स्थार अस्ताम् व्राप्तास

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
MGRM	Sunergy Development, LLC	1000 N US Highway One # 762	□ Add
		JUPITER, FL 33477	□ Remove
			□ Change
MGR	Marlin Group Managment, LLC	250 TEQUESTA DRIVE	■ Add
		SUITE 200	□ Remove
		JUPITER, FL 33469	Change
MGR	Sunergy Development, LLC	1000 N. US Highway One #762	■ Add
		JUPITER, FL 33477	☐ Remove
			Change
	***************************************		□ Add
			Change
			Change
			Add
			☐ Remove
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Filing Fee: \$25.00