

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((11170002797243)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

VALUE AND 181 FOR THE STATE OF THE STATE OF

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Fhone : (323) 962-8600 : (323)962-3889 Fax Number

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMITY LANE REALTY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

D SCOT

OCT 2 5 2017

10/24/2017

COVER LETTER

TO:		tration Section of Corp			[
CUDIC		AMITY L	ANE REALTY, LLC		
SUBJE	CI: _		Name of Limi	red Liability Company	
The enc	losed :	Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please re	etum a	III согте <mark>зр</mark> ог	ndence concerning this matter	to the following:	i
			Cheyenne Moseley		
				Name of Person	
			Legalzoom.com. Inc.		
				Firm/Company	
			101 N. Brand Blvd., 11t	h Floor	
			**	Address I	1
			Glendale, CA 91203		
				City/State and Zip Code	
			William@cravenhillcapit	tal.com to be used for future annual report notif	ton (inn)
For furt	her int	formation co	oncerning this matter, please on		icanion)
		loseley		800 773-0888 e	et. 9724
•		Nume o	l'Person	at ()	: Telephone Number
Enclose	ed is a	check for th	ne following amount:		
□ \$25	i,00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is erelosed)
		Registr Divisio P.O. Bo	ING ADDRESS: ution Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations

AMITY LANE REALTY, LLC

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

(Name of the Limited Liability Company as it now appears on our records.)

(it i with thinks of	Summary Company)
The Articles of Organization for this Limited Liability Company	were filed on 09/22/2017 and assigned
Florida document number 1.17000196926	:
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "L.L.C." or the abbreviation "L.LC."
Enter new principal offices address, if applicable:	1343 MAIN STREET, SUITE 403
(Principal office address MUST BE A STREET ADDRESS)	SARASOTA, FL 34236
Enter new mailing address, if applicable:	1343 MAIN STREET, SUITE 403
(Mailing address MAY BE A POST OFFICE BOX)	SARASOTA, FL 34236
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, enter the name of the ne
	<u>+</u>
Name of New Registered Agent:	73 11
New Registered Office Address:	Enter Florida street address (1)
	, Florida
	City Zip Cock
New Registered Agent's Signature, if changing Registered Agent:	1 Ti
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = N $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	WILLIAM D KEMP	1343 MAIN STREET, SUITE 409	
		SARASOTA, FL 34236	☑ Remove
AMBR	BRENDAN H PERLEE	1343 MAIN STREET, SUITE 409	Add
		SARASOTA, FL 34236	Ø Remove
AMBR	WILLIAM D KEMP	1343 MAIN STREET, SUITE 403	🗹 Add
		SARASOTA, FL 34236	Remove
AMBR_	BRENDAN H PERLEE	1343 MAIN STREET, SUITE 403	Z Í Add
		SARASOTA, FĹ 34236	Remove
			□ Add
			Remove
			Ağd
			Remove

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E.	Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of feeeipt or filed date and cannot be more than 90 days after
	the date this document is filled by the Florida Department of State)
	Dated
	Wither
	Signature of a member or authorized representative of a member
	WILLIAM D KEMP
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00