## L17000199641

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2020 JAN 24 PM 12: 56 SECREMARY OF STATE

O SIMMONS JAN 25 2020



January 15, 2020

ALLAN CASEY 395 AVENUE C NW WINTER HAVEN, FL 33881

SUBJECT: 659 AVE A SW, LLC Ref. Number: L17000199641

We have received your document for 659 AVE A SW, 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) 245-6050.

Letter Number: 620A00001173

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

Division of Communities D.O. DOV 6207 Well-level Physics 2001

## **COVER LETTER**

 $\mathcal{I}_{n-1}(x,y) = \{x \in \mathbb{R}^n \mid x \in \mathbb{R}^n \mid x \in \mathbb{R}^n : |x| \leq n \}$ 

TO:

TO: Registration Se Division of Co		1	
659 Ave A	SW, LLC	•	
SUBJECT:		ited Liability Company	
	Amendment and fee(s) are sub	<u> </u>	
	Allan L. Casey		
		Name of Person	
	Allan L. Casey, Attorney a	it Law	
		Firm/Company	<del></del>
	395 Avenue C NW		
	<del></del>	Address	<del></del>
	Winter Haven, FL 33881		
	allan@allancaseylaw.com	City/State and Zip Code	
	E-mail address: t	to be used for future annual report noti	tication)
For further information of	oncerning this matter, please c	all:	
Andrew J. Oram		863 294-4468 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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 Addres		Street Address:	etion
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 632	.7	The Centre of T	allahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

659 Ave A SW, LLC

(Name of the Limited Liabil (A Florid	ity Company as it now appears on our rec a Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability C Florida document number H17000252611	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim		<b>2020</b> Sec
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2
(Principal office address MUST BE A STREET ADDI	RESS)	
		1: 57 FAIE
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ada	lress
	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 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	Allan L. Casey	395 Avenue C NW	□Add
		Winter Haven, FL 33881	≣Remove
			□Change
MGR	Reggie Whitehead	601 6th ST SW	🗀 Add
		Winter Haven, FL 33880	S Remove
			S T Panee T
MGR	Steven E. Crisman	4401 Old Bartow Rd	75 24 T
		Lake Wales, FL 33859	Sie Sie Die Die Sie Sie Sie Sie Sie Sie Sie Sie Sie S
			Change
MGR	Silver Properties of WH, LLC	199 Avenue B NW	<b>=</b> Add
		Suite 385	□Remove
		Winter Haven, FL 33882	□Change
	<u> </u>	<del></del>	□Add
			□Remove
			□Change
		<del></del>	□Add
		<del></del>	□Remove
			□Change

E. Effective date, if other than the date of filing:  (tran effective date, if other than the date of filing:  (tran 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 605.020  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 vecord is filed.  Dated  Dated  Dated  Dated  Dated  Dated  Date State St						_
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(the Let)	Dated	January 22	2020 Mil Can,			
Signature of a member or authorized representative of a member		Signature o	f a member or authorized r	epresentative of a member	<del></del>	
Allan L. Casey, as manager of Silver Properties of WH, member	ΑB	an L. Casey, as manager of Silv	er Properties of WH me	ember		

Filing Fee: \$25.00