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# COVER LETTER

### TO: **Registration Section Division of Corporations**

Design and Dwell Homes LLC

SUBJECT:

Nathan Anguiano

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:

Nathan Anguiano

Name of Person Design & Dwell Homes LLC Firm/Company 1316 Ravens Run E Address Miramar Beach, FL 32550 City/State and Zip Code nathan@designanddwellhomes.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 502 322-4020 at (\_\_\_\_ Daytime Telephone Number Area Code Name of Person Enclosed is a check for the following amount: □ \$25.00 Filing Fee ■ \$30.00 Filing Fee & □ S55.00 Filing Fee & Certificate of Status

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

# TO ARTICLES OF ORGANIZATION OF

Design and Dwell Homes LLC

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 20, 2017 and assigned

Florida document number L17000217355

This amendment is submitted to amend the following:

## A. If amending name, enter the new name of the limited liability company here:

Design & Dwell Homes LLC

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)

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1316 Ravens Run E

Miramar Beach, FL 32550

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(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:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	:55
	, <b>F</b>	lorida 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

r If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
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• D. II amending any other information, enter change(s) here: (Anach additional sneeds, if necessary.)

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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.

August 5 Dated		2)	.019			
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	Ash.	/				
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	Sign	ature of adnem	iber or authorized r	epresentative of a r	nember	

Nathan Anguiano

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00