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COVER LETTER

OLD WATER	RA The End	clave at Blairstone, LLC		
SUBJECT: Name of Limited Liability Company				
The enclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Misty Kent		
			Name of Person	
		Royal American Companie	28	
			Firm/Company	
		1002 W. 23rd St., Ste. 400		
Address				
		Panama City, FL 32405		
			City/State and Zip Code	
		misty.kent@royalamerican.	com o be used for future annual report notific	Southern L
For further in	iformation co	oncerning this matter, please ca		ationy
Misty Kent	normation co		950 914.3234	
	Name of	Person	at ()	Felephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	iling 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)
	MAILI	NG ADDRESS:	STREET/COURIE	R ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

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TO:

Registration Section

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RA The Enclave at Blairstone, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Co Florida document number 1.17000225808	ompany were filed on 10/31/17	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u>ESS)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addr		records, enter the name of the no
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
		, Florida
	City	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>	<u>Address</u>	Type of Action
MGR	Southern Coastal Mortgage Co	1002 W. 23rd St., Ste. 400	Add
		Panama City, F1. 32405	Remove
			□ Change
MGR Wad	Waddell Plantation, Inc.	1002 W, 23rd St., Ste. 400	Add
		Panama City, FL 32405	□ Remove
			Change
AMBR Southern	Southern Coastal Mortgage Co	1002 W. 23rd St., Ste. 400	
		Panama City, F1, 32405	■ Remove
			Change
AMBR	Waddell Plantation, Inc.	1002 W, 23rd St., Ste. 400	_ B Add
		Panama City, FL 32405	☐ Remove
			Change
			Add
			Remove
			☐ Change
			□ Add
			☐ Remove
			Change

•		ation, enter change(s) here: (Attach additio	•
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(If an eff <u>Note:</u>	If the date inserted in this l	ast be specific and cannot be prior to date of filing or me	(optional) ore than 90 days after filing.) Pursuant to 605.0207 (3)(bg requirements, this date will not be listed as the
	cord specifies a delaye 90th day after the re	ed effective date, but not an effective to cord is filed.	ime, at 12:01 a.m. on the earlier of:
Dated	November 30	2017	
	- Qui	Signature of a member or dutlorized representative	of a member
	Lauretta J. Pippin, Sec	V	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00