	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT .	MAIL
	(Business Entity Name)	
	(Document Number)	_
Certified Copies	Certificates of Status	
Special Instruction	s to Filing Officer:	

Office Use Only



600307592076

01/16/18--01012--017 **25.00

B FIGUEROA JAN 17 2018

COVER LETTER

TO:	Registration Sec Division of Corp							
CHID IE	5231 Laredo) Way LLC						
Name of Limited Liability Company								
The end	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.					
Please	return all correspor	ndence concerning this matter t	to the following:					
		Richard S. Tolbert						
			Name of Person					
			Firm/Company					
		12161 Ken Adams Way, Si	uite 123					
			Address	_				
		Wellington, FL 33414						
		City/State and Zip Code						
TolblawFL@aol.com								
		E-mail address: (1	to be used for future annual report notific	cation)				
For fur	ther information co	oncerning this matter, please ca	ıll:					
Richar	d S. Tolbert		561 832-8700 at ()					
_	Name of	Person	at () Area Code Daytime	Telephone Number				
Enclose	ed is a check for th	e following amount:						
■ \$2:	5.00 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:

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**

5231 Laredo Way LLC	
(Name of the Limited Liability Compa (A Florida Limited I	nv as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.17000234922}{1.17000234922}$	were filed on 11/14/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Black Stone Equestrian LLC	
The new name must be distinguishable and contain the words "Limited Liabi	
Enter new principal offices address, if applicable:	12161 Ken Adams Way. Suite 123
(Principal office address MUST BE A STREET ADDRESS)	Wellington, FL 33414
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
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 cunfff is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited listility 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> Name. <u>Address</u> Type of Action □ Add ☐ Remove _□ Change _ 🗆 Add ☐ Remove __ 🗆 Change □ Add ☐ Remove ☐ Change □ Add _□ Remove ☐ Change □ Add ☐ Remove 窗 _D 🙀 nge □ Remove ☐ Change

ı	ling any other information	-		• • •	
. ·	-				
					_
	-	,			
			,=		
			-		
		·		·	
	-				
-			<u>.</u>		 -
		1-			
					
	····				
ocument e recor	date, if other than the date is listed, the date must be the date inserted in this block it's effective date on the Depart d specifies a delayed efforth day after the record	does not meet the applica tment of State's records.	ble statutory filing requ	irements, this date will	not be listed as
Ja ated	nuary 12.	2018			
	Tolle J.	nature of a member or author	75 Menes	T.C.C.	SECRE I
	Richard S. Tolbert, as Mana	ger		 .	N 16
		Typed or printed	I name of signee		PM 2: 26
					2: 2
		Page	3 of 3		26 28

Filing Fee: \$25.00