

217000247004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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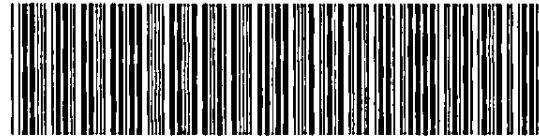
(Business Entity Name)

(Document Number)

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CLERK OF SUPERIOR COURT
FALLASVILLE, TEXAS

O SIMMONS

DEC 19 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1801 Live OAK, LLC (Change to Live OAK 1801 LLC)
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:

ERICK
Shirley W. Pickton
Name of Person

Live OAK 1801 LLC
Firm/Company

1213 PAWNEE TERRACE
Address

INDIAN HARBOUR BEACH, FL. 32937
City/State and Zip Code

Shirley Pickton @ Yahoo.com
E-mail/Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shirley Pickton at (214) 808-1108
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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**

1801 Live Oak, LLC

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

The Articles of Organization for this Limited Liability Company were filed on Dec. 4, 2017 and assigned
Florida document number L17000247004

This amendment is submitted to amend the following:

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

Live Oak 1801 LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

1213 Pawnee Terrace
Indian Harbour Beach
FL. 32937

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 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>	<u>Type of Action</u>
AMBR		← Shirley W. Pickton	<input type="checkbox"/> Add
↑		1213 Pawnee Terrace	<input type="checkbox"/> Remove
		Indian Harbour Beach FL.	<input checked="" type="checkbox"/> Change
		32937	
MGR	ERICK W. PICKTON	1213 Pawnee Terrace	<input type="checkbox"/> Add
↑		Indian Harbour Beach	<input type="checkbox"/> Remove
		FL. 32937	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Add to articles:

Purpose: any and all lawful business

17 DEC 18 PM 9:55
CLERK
TREASURER
SECRETARY
DIRECTOR
MANAGER
ASSISTANT
CLERK
RECORDS
ADMINISTRATIVE

E. Effective date, if other than the date of filing: 01/01/2018 (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.

Dated

12/15/17

Shirley Wachner Pickton
Signature of a member or authorized representative of a member

SHIRLEY WAEHNER PICKTON
Typed or printed name of signee