117000258530

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(City/State/Zip/Phone #)
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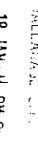
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COVER LETTER

TO: Registration S Division of Co		ı	٠	
SUBJECT:	CARNOW OF (CENTRAL FLOR	HOA LLC	
	Name of Lim	ited Liability Company		
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	oondence concerning this matter	to the following:		
		1		
		yler Hiatt Name of Person w of Central		
	Carno	Name of Person	GloddallC	
	1455 Lan	dstreet Rd Firm/Company	* 513	
		, ,		
	7			
		Address		
	64. I		N (
	Orlana	O F.L. 328- City/State and Zip Cod	2 9	
	E-mail address: (to be used for future arinu	al report notification)	
For further information	concerning this matter, please co	all:		
Tyler	tiatt	at (407)_	615 - 0208	
Name	of Person	Area Code	Daytime Telephone N	umber
Enclosed is a check for	the following amount:	ı		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee		00 Filing Fee, tificate of Status &
		(additional copy is e	nclosed) Cer	tified Copy litional copy is enclosed)
		1		
34.40	LING ABBRES	erne.	TO COUNTY AND THE	20
	LING ADDRESS: tration Section		ET/COURIER ADDRE ation Section	33:
Divis	ion of Corporations	Divisio	n of Corporations	
	Box 6327 nassee, FL 32314		Building xecutive Center Circle	
			ssee FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARNOW OF (CENTRAL 1	FLORIDA	+ LLC		
(Name of the Limited Liabilit (A Florida	ty Company as it Limited Liability	now appear Company)	s on our records.)	·	
The Articles of Organization for this Limited Liability C. Florida document number 17000258530	ompany were f	iled on	12/19/17	and assi	gned
This amendment is submitted to amend the following:	 ·				
-					
A. If amending name, enter the new name of the limi	ted liability co	mpany he	<u>re</u> :		
The new name must be distinguishable and contain the words "Limi	ited Liability Con	pany," the d	esignation "LLC" or	the abbreviation "L.I	C."
Enter new principal offices address, if applicable:	1				
(Principal office address MUST BE A STREET ADDR	PESS)			18	ALL:
	-			JÆK 	10- Z
				علم	
Enter new mailing address, if applicable:				<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)				<u> </u>	
			. <u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office additional agent.		ddress on	our records, <u>e</u>	nter the name o	of the new
Name of New Registered Agent:					
New Registered Office Address:	<u> </u>	Enter Flor	ida street address	<u></u>	
			, Florid	a	
	ď	ty:	, 1 10110	Zip Code	
New Registered Agent's Signature, if changing Registered	l Agent:				
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confidence of all statutes relative to the proper and confidence of the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete perfoi ent as provid	rmance of ed for in C	my duties, and I Thapter 605, F.S.	am familiar with Or, if this docu	and nent is
	If Changing R	egistered Ag	ent, <u>Signature of No</u>	ew Registered Agent	<u> </u>

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the or removed from our records:		title, name, and address of each	person being added	
MGR = M AMBR = A	anager uthorized Member			
<u>Title</u>	Name	Address		Type of Action
MGR	Victor J. Lopez	1453 W	Landstreet Rd #301	□ Add
		oriendo	,	⊠ Remove
				Change
MER	<u>Victor Javier Rodriguez</u>	1453 W	Landstreet Rd. #301	`T\$. Add
		Orlando	F.L. 32824	Remove
		<u> </u>		Change
				Add
				Remove
				Change
				D Add
				□ Remove
				Change
				🗆 Add
				□ Remove
				Change
				O Add
				_□ Remove
				Change

ii ainenui	ng any other information	, enter change	e(s) nere: (Att	a c h additional sh	eets, if necessary.)	
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			·	<u> </u>		
Effective d	ate, if other than the date date is listed, the date must be s	of filing:	12/19/1	7	(optional)	
Note: If the	e date inserted in this block of	loes not meet the	e applicable stat	utory filing require	onents, this date wil	rsuant to 605,0207 I not be listed as
document s	effective date on the Depart	ment of State's r	ecords.			
ne record	specifies a delayed eff	ective date la	out not an ef	fective time at	- 12·01 a.m. on	the earlier of
The 90t	h day after the record	is filed.	,		12.01 (111, 031	the earner o
	12 10	<u></u>	~ 'I~			
Dated		, <u>u</u>	<u>811 </u>			
	12-19 Fyle H	enth				
_	Signa	iture of a member	or authorized rep	resentative of a men	ıber	
		Tulor	l Kl. Hiash	1		
_		Tyler 1	or printed name of	fsignee	 .	 -
			Page 3 of 3			

Filing Fee: \$25.00