## L1800000 7235

(Re	equestor's Name)	
(Ac	ldress)	
(		
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
_	_	_
(Bı	siness Entity Nar	ne)
(Do	ocument Number)	
O. Pr. J. O. C.		E Charles
Certified Copies	_ Certificates	s or Status
Special Instructions to	Filing Officer	
-		

Office Use Only



900348995509

07/27/20--01089--030 \*\*25.00

2020 JUL 27 AM 8: 00 Segretal Collabore

D. BRUCE SEP 15 2020

## **COVER LETTER**

	egistration Sec ivision of Corp					
cup in or		CONTRACTORS, LLC				
SUBJECT	:	Name of Lim	ited Liability Company			
The enclos	ed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please retu	rn all correspoi	ndence concerning this matter	to the following:			
		RICK W. SADORF, ESQ.				
			Name of Person			
		COOK & SADORF, PL				
			Firm/Company			
		1744 N BELCHER ROAD	, SUITE 150			
		-	Address			
		CLEARWATER, FL 3376	5			
		·	City/State and Zip Code			
		RICK@PLGLAWYER.CO				
		E-mail address: (	to be used for future annual report notifi	cation)		
For further	information co	oncerning this matter, please ca	all:		<b>26</b>	
RICK W.	SADORF, ESÇ	).	727 726-1514 at ( )		IZO JUL	u,
	Name of	Person		Telephone Number	. 27 Anns	-Valvey Litera }
Enclosed is	s a check for th	e following amount:			AH 8:	Ü
<b>■</b> \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ing Ree.  e of Status &	

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAY AREA CONTRACTORS, LLC

(Name of the Limited Liab (A Flori	ility Company as it now ida Limited Liability Con	r appears on our records. npany)	)	
The Articles of Organization for this Limited Liability	Company were filed	l on	and as	signed
Florida document number L18000007235				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	mited liability comp	oany here:		
MIDDLE BAY HOMES, LLC				
The new name must be distinguishable and contain the words "Li	imited Liability Company	y," the designation "LLC"	or the abbreviation "I	IC."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	ORESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
(Mulling dudless MAT BE AT OST OFFICE BOA)	<del></del>			
		· · · · · · · · · · · · · · · · · · ·	<del></del>	
B. If amending the registered agent and/or register	od office address or	s our records anter ti	ha namb of the en	· www. = j !v registered
agent and/or the new registered office address here		rour records, enter ti		
			AS	े <del>डे.ची</del> 1 ।
Name of New Registered Agent:			SE A	
Island of New Registered Figure.		<del></del>	m = c	<del>)                                    </del>
New Registered Office Address:		nter Florida street address	<u> </u>	⊃ <b>∋</b>
	E	nter r toriaa street aaaress		
		, Flor		
	City		Zip Code	
New Registered Agent's Signature, if changing Register	red Agent:			
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this change	complete performa agent as provided f red office address,	nce of my duties, and for in Chapter 605, F.	l I am familiar wi S. Or, if this doc	th and ument is
	If Changing Regist	ered Agent, Signature of 1	New Registered Age	<u></u>

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>	Address	Type of Action
	···		
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		<del></del>	S D Range
	<del></del>		SECRETION OF THE MOVE
			□ III move
			© 00 00 00 00 00 00 00 00 00 00 00 00 00
	<del></del>	-	□Add
			□Remove
			□Remove
			□Change

	·
	<del></del>
fan e	tive date, if other than the date of filing: (optional) Tective 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 605,020
locur	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	the interest of the Department of State & Peddid.
reco	rd 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
d is f	
	2020
	July 24 2020
Datec	·

Filing Fee: \$25.00

Typed or printed name of signee