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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO:		tration Section of Corp		•	
SUBJEC	ςτ. (Betty Apartments LLC		
SUDJE	·1		Name of Limit	ed Liability Company	
			mendment and fee(s) are subm	-	
Please re	eturn a	ll correspon	dence concerning this matter to	the following:	
			Angela N Tharpe		
				Name of Person	
			The Collier Companies		
				Firm/Company	
			220 N Main Street		
				Address	
			Gainesville FL 32601		
				City/State and Zip Code	
			Angela HarpE OC E-mail address: (to	be used for future annual report notificat	<u>)</u>
For furth	ner infe	ormation cor	ncerning this matter, please cal	11:	
Angela l	N Tha	rpe		352 416-1423 at ()	
	-	Name of I	Person	Area Code Daytime Te	lephone Number
Enclosed	d is a c	heck for the	following amount:		
\$25.	00 Fil	ing 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

Collier-Lake Betty Apartments LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company	were filed on March 06, 2018	and assigned
Florida document number L18000058355		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
N/A		_
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS)		33 PALE
		AH AH
		SSI 21
Enter new mailing address, if applicable:	N/A	me me
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		그 글래
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: N/A		enter the name of the nev
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ridaZip Code

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	Collier-Lake Betty Member LLC	220 N Main Street,	
		Gainesville FL 32601	☐ Remove
			Change
			Add
			Remove
			Change
			Remove
			□ Change
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F effor	e date, if other than the date of filing: N/A (op	tional)	
(If an e	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days af	ter filing.) Pursuant to 60	05.0207
	If the date inserted in this block does not meet the applicable statutory filing requirements, that's effective date on the Department of State's records.	his date will not be in	sted as
	ord specifies a delayed effective date, but not an effective time, at 12:01 poth day after the record is filed.	a.m. on the ear	lier of
Date	March 20, 2018 M. Man Callier	a D∖	
	Signature of a thember or authorized representative of a member	(3)/	

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Typed or printed name of signee

Filing Fee: \$25.00