· L18000068345

(Re	questor's Name)	,
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	2325 Shann	non, LLC		
ocester.		Name of Lin	nited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Robert Francez		
	Name of Limited Liability Company sed Articles of Amendment and fee(s) are submitted for filing. um all correspondence concerning this matter to the following: Robert Francez			
		2325 Shannon, LLC	mitted for filing. to the following: Name of Person Firm/Company Address 59 City/State and Zip Code to be used for future annual report notification) fill: 337 Area Code Daytime Telephone Number \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy	
			Firm/Company	
		21 Blackwater Street		
			Address	
		Santa Rosa Beach, FL 324	359	
			City/State and Zip Code	<u> </u>
			ent and fee(s) are submitted for filing. In Francez Name of Person Shannon, LLC Firm/Company ackwater Street Address Rosa Beach, FL 32459 City/State and Zip Code olalaw.com E-mail address: (to be used for future annual report notification) this matter, please call: at (
		E-mail address: (to be used for future annual report noti	fication)
For further in	nformation co	oncerning this matter, please c	all:	
Robert Franc	cez			
	Name of	Person		e Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling Fee		Certified Copy	Certificate of Status &

MAILING ADDRESS:

TO:

Registration Section

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

2323 Shaillon, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our inited Liability Company)	records.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L18000068345</u>	pany were filed on $3/15/2018$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I	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	<u> </u>	- 7 0
		LAHAS:
Enter new mailing address, if applicable:	-	A FORD
(Mailing address MAY BE A POST OFFICE BOX)		F STATE FLORIDA F 22
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street d	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>	Type of Action
MGR	Thurman K Minchew Jr.	21 Blackwater Street	□ Add
		Santa Rosa Beach, FL	■ Remove
		32459	Change
MGR	Robert Francez	110 Stonehenge Road	= Add
		Lafayette, LA	□ Remove
		70503	Change
AMBR	Chewcon, LLC	16 South Lake Drive	_
		Santa Rosa Beach, FL	☐ Remove
		32459	□ Change
AMBR	Mike McKenzie	P.O. Box 51707	■ Add
		Lafayette, LA	□ Remove
		70505	☐ Change
			□ Add
			□ Remove
			Change
			□ Add
			☐ Remove
			☐ Change

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ective date, if other than the effective date is listed, the date mu	date of filing st be specific and	cannot be prior to	date of filing o	r more than 9	(option 0 days after fil	al) ing.) Pursuai	nt to 605.02
te: If the date inserted in this b	lock does not m	eet the applicable	e statutory fi	ling require	ments, this d	ate will not	be listed
ument's effective date on the I	epartment of St	ate's records.					
record specifies a delaye	d effective d	ate but not a	n effectiv	e time at	12·∩1 a r	n on the	e earlier
he 90th day after the re-	ord is filed.	ato, bac not a		c time, at	12.01 0		. camer
M 1 20		2010					
March 28	,	2018	•				
	Signature of a m	nember or authoriz	ed representat	rive of the mem	ber		

Page 3 of 3

Filing Fee: \$25.00