118000069087

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	- #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





100313679891

05/24/19--01003--020 +*25.00

DIVISION OF CURPORATIONS

N COOPER MAY 2 5 2018

COVER LETTER

TO:

FO: Registration Se Division of Cor			
Carlisle Ho	ldings 250, LLC		
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
	ndence concerning this matter t		
	Robert C. Benedict		
	••	Name of Person	
	Wideikis, Benedict & Bern	tsson, LLC	
		Firm/Company	<u></u>
	3195 S. Access Road		
		Address	
	Englewood, Florida 34224		
		City/State and Zip Code	
	rhenedict@bigwlaw.com	to be used for future annual report notif	ication)
Car forth as information of	concerning this matter, please ca		,
	once ting this matter, please co		
Robert C. Benedict		941 627-1000 at () Area Code Daytime	e Telephone Number
Name o	of Person	Area Code Dayting	e Telephone (Valloe)
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	L: \$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)
Regist Divisi	LING ADDRESS: ration-Section on of Corporations Box 6327	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Carlisle Holdings 250, LLC		
(Name of the Limited Liability Com (A Florida Limite	ipany as it now appears on our records.) d Liability Company)	<u> </u>
he Articles of Organization for this Limited Liability Compa	ny were filed on March 16, 2018	and assigned
orida document number 1.18000069087		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited li	ability company here:	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or t	he abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		MAY 2
		PF CO
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	<u></u>	R R R
-	<u></u>	<u> </u>
If amending the registered agent and/or registered egistered agent and/or the new registered office address have been addressed agent.	office address on our records, <u>er</u>	nter the name of the
Name of New Registered Agent:		
-		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address Florid	aZip 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>	Address	Type of Action
MGR	Michael Ruettgers	453 Bedford Road, Carlisle, MA 01	Add
	<u>.</u>		Remove
			= Change
			□ Remove
	i		Change
	.! -		
			☐ Remove
			Change
	-	<u> </u>	Add
			□ Remove
			Change
			□ Remove
			□ Change
			
			Remove
			Change

•				<u> </u>	
		<u> </u>			
			·	<u> </u>	
•	•				
•		· · · · · ·	<u> </u>		
		- -		<u> </u>	
	<u></u>				
				·	a
					W MA
					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	·			<u> </u>	
					AN OR A
					
					<i>_</i>
iffec	tive date, if other than the date of fective date is listed, the date must be spe	of filing:		(optional)	
<u>Note</u>	fective date is listed, the date must be spe If the date inserted in this block do ment's effective date on the Departm	es not meet the application	cable statutory titing r	than 90 days after filing, equirements, this date	Pursuant to 605.020 will not be listed a
ie re Th	cord specifies a delayed effected by a second is	ctive date, but no filed.	ot an effective tim	ne, at 12:01 a.m.	on the earlier o
Date	May 15	. 2019	<u>3</u> .		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00