L180000 11135

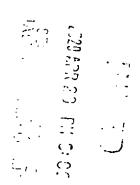
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	<u>.</u>

Office Use Only



300343419553

04/20/20--01035--030 **25.00



Y SUI KEP MAY 0 1 2020

COVER LETTER

TO: Registration Sec Division of Corp				
	atherine L. Bu	ms 110		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspor	idence concerning this matter	to the following:		
	K	atherine Keith		
		Name of Person		
		Firm/Company		
		• •		
	797	Teague Trail 1211	03	
		Address		
	La	Teague Trail 1218 Address dy Lake, FL 3215 City/State and Zip Code	9	
		City/State and Zip Code		
	katie burns	@ the villages.com	$ \uparrow $	
	E-mail address: (to be used for future annual report notif	ication)	
For further information co	ncerning this matter, please ca	all:		
KatieKeit	1.	350 201 0	II 1	
Name of	· · · · · · · · · · · · · · · · · · ·	at (352) 321 -9 Area Code Daytime	Telephone Number	
Name of	reison	Area Code Daytime	rerephone Number	
Enclosed is a check for the	e following amount:			
\$25.00 Filing 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	•	Street Address:		
Registration S		Registration Sec	tion	
Division of Co	=	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	henne L Burns, LLC	,
(Name of the Limited 1	Liability Company as it now appears Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liabi		3/26/18 and assigned
This amendment is submitted to amend the followi	ng:	1
A. If amending name, enter the new name of th	e limited liability company her	e: NA
The new name must be distinguishable and contain the words	s "Limited Liability Company," the des	ignation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	le: <u>NA</u>	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>~/</u> A-	
		- Free D
B. If amending the registered agent and/or registered agent and/or the new registered office address h	stered office address on our rec <u>sere</u> :	ords, enter the name of the new registers
Name of New Registered Agent:	Katherine L.	
New Registered Office Address:	Enter Florid	a street 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	Z Kathenne Kei	mailing: 797 Teague Trail 1210 Lady Like, FL 3215 principal: 9455 SE 16151 St Summerfield, FL 344	3 59□Add
(I rec	entlygot married Langing hame from Katheri to Katheri	principal: 9455 SE 16151 St Summerfield, FL 344	9l □Remove
()	to Katheri	ne Keith)	□ Change
			□ Remove
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□ Change
			□Remove

				<u> </u>	
			- ·		
			<u> </u>		
			 		
	2.5				
					
				···	
			<u> </u>		
				- -	
	-		· ·	-	
					·
ffective date, if other than an effective date is listed, the date line term in the ocument's effective date on the	must be specific and c is block does not me	annot be prior to date of set the applicable statu	filing or more than 90 tory filing requiren	(optional) days after filing.) Pursu tents, this date will n	ant to 605.01 ot be listed
record specifies a delayed effe d is filed.	ective date, but not a	n effective time, at 12	:01 a.m. on the ear	ier of: (b) The 90th	day after t
Pated : April 16, 20	20,				
	42	ember of authorized rep	resentative of a memb	er	
	G	· · · · · · · · · · · · · · · · · · ·			

Filing Fee: \$25.00