

L18000079084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

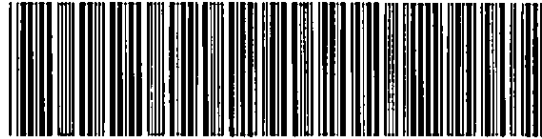
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2020 JUN 11 PM 1:22

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A CUS
Amend

JUN 5 2020

I ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FIRST FOUNDATION INVESTMENTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

OCTAVIA GRIMES-HOPKINS

Name of Person

FIRST FOUNDATION INVESTMENTS LLC

Firm/Company

221 SAINT REGIS DRIVE

Address

PENSACOLA, FL 32505

City/State and Zip Code

1FOUNDATIONINVESTMENTS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OCTAVIA GRIMES-HOPKINS

850

483-7664

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

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**

FIRST FOUNDATION INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2020 JUN 11 PM 1:26
CLERK OF CIRCUIT COURT
JACKSONVILLE, FL

The Articles of Organization for this Limited Liability Company were filed on 03/26/2018 and assigned
Florida document number L18000079084.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

221 SAINT REGIS DRIVE, PENSACOLA, FL 32505

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

221 SAINT REGIS DRIVE, PENSACOLA, FL 32505

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

OCTAVIA GRIMES-HOPKINS

New Registered Office Address:

221 SAINT REGIS DRIVE

Enter Florida street address

PENSACOLA

Florida 32505

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.

Octavia Grimes-Hopkins
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>	<u>Type of Action</u>
AMBR	OCTAVIA GRIMES-HOPKINS	221 SAINT REGIS DRIVE, PENSACOLA FL 32505	<input checked="" type="checkbox"/> Add
		(old) 1 EMERALD AVE, PENSACOLA, FL 32505	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	KEITH AUTREY	6616 BLACK OAK PL, PENSACOLA FL 32526	<input checked="" type="checkbox"/> Add
		(old) 2512 N. 8TH AVE, PENSACOLA, FL 32503	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

ADDRESS CHANGE, NAME TO MARRIED NAME CHANGE AND TITLE FOR:

OCTAVIA GRIMES CHANGE TO OCTAVIA GRIMES-HOPKINS, TITLE CHANGE TO AMBR/MGR

KEITH AUTREY REMAIN MGR/ KEITH AUTREY ADDRESS CHANGED ONLY

MBR ADDRESS CHANGE ONLY: CARL GRIMES SR. (new) 2303 N HAYNE ST PENSACOLA FL 32503

ADD TO LLC AS MBR : RYNELL HOPKINS SR.

REMOVE FROM LLC: WALTER GRIMES, MICHAEL GRIMES, TRACY COKER, DEUN ABNEY

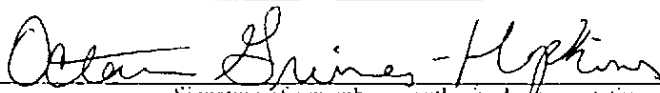
E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated JUNE 5TH 2020



Signature of a member or authorized representative of a member

OCTAVIA GRIMES-HOPKINS

Typed or printed name of signer