L18000107899

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500358078535

To the state of th

01/20/21--01003--002 **25.00

2021 JAN 19 PH 2: 07

2/23/21

COVER LETTER

	on Section f Corporations		
	s's Landing Vero, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	les of Amendment and fee(s) are sub		
Please return all cor	rrespondence concerning this matter	to the following:	
	Robin A. Lloyd, Sr.		
		Name of Person	
	Robin Lloyd & Associates	. P.A.	
		Firm/Company	-
	5089 Highway A1A, Ste 1	00	
		Address	
	Vero Beach, FL 32963		
		City/State and Zip Code	
	E-mail address:	to be used for future annual report notific	ration)
For further informa	tion concerning this matter, please c	all:	
Robin A. Lloyd, Sr	•,	772 234-5500 at ()	
N	lame of Person	Area Code Daytime	Felephone Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing F	Fee S30.00 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)
<u>Mailing A</u>	.ddress:	Street Address:	
Registra	tion Section	Registration Sect	
Division	of Corporations	Division of Corp	orations

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

Logan's Landing Vero, LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L18000107899	were filed on April 30, 2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	itity 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)		021
		<u></u>
		19
Enter new mailing address, if applicable:		<u>P</u> —
Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florid	
	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
MBR	James Thomas Logan Trust	1025 26th Ave	□Add
		Vero Beach, F1, 32960	■Remove
			□Remove
			Change 22
			2021 Change 21 JA Add
			TD Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Remove
		<u></u>	□Change

				<u> </u>	-
					•
					-
					-
		.			-
				202	-
					_
					Ti
		 	<u>_</u>		11
					י
				. ?:	
				7	-
Tective date, if other than the date of for a feetive date is listed, the date must be specificate: If the date inserted in this block does a cument's effective date on the Department	not meet the applica	o date of ming of more	(optiona than 90 days after filir equirements, this da	g.) Pursuant to 60:	5.020 ted a
ecord specifies a delayed effective date, bu is filed.	it not an effective tin	ne, at 12:01 a.m. on	the earlier of: (b)	The 90th day afto	er the
led January 674	. 2021	<u>-</u> ·			
Sligabella Co Signature	on more or author	rized representative of	a member		
	, unquintendence of autility	· · · · · · · · · · · · · · · · · · ·			

Filing Fee: \$25.00