

LIB000146679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

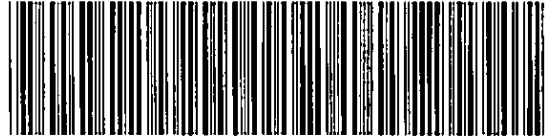
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07/12/18--01022--006 \*\*25.00

FILED  
18 JUN 25 PM 12:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ST  
JUN 25 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 20, 2018

SIMON CORDERY  
2818 SW 132ND TER  
ARCHER, FL 32618-2129

SUBJECT: THE NOTE GROUP III, LLC.  
Ref. Number: L18000146679

*Called 7/23/18  
Changing RA/  
Managers  
Advised her to  
Send docs back to  
Octavia S. . . . REC  
altm As she did not  
want to wait*

We have received your document for THE NOTE GROUP III, LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist III

Letter Number: 018A00014926

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The NOTE GROUP III, 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:

SIMON CORDERY

\_\_\_\_\_  
Name of Person

THE NOTE GROUP III, LLC.

\_\_\_\_\_  
Firm/Company

2818 SW 132nd Ter.

\_\_\_\_\_  
Address

Archer, FL 32618-2129

\_\_\_\_\_  
City/State and Zip Code

scordery@waterandair.com

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

For further information concerning this matter, please call:

Simon Cordery

352

359-1003

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)

\* WAS SENT IN

EARLIER C# 331

\$25.00 CLEARED 7/16/2018

L18000146679

### MAILING ADDRESS:

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

The NOTE GROUP III, LLC.

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

The Articles of Organization for this Limited Liability Company were filed on JUNE 14, 2018 and assigned  
Florida document number L18000146679.

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 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)

2818 SW 132nd TER.

ARCHER, FL. 32618-2129

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2818 SW 132nd TER.

ARCHER, FL. 32618-2129

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18  
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TALLAHASSEE, FLORIDA

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:

2818 SIMON CORDERY

New Registered Office Address:

2818 SW 132nd TER.

*Enter Florida street address*

ARCHER

*City*

Florida 32618-2129

*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.*

  
-# 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>
MGR	MARSHA PHELPS	11843 Blue Heron Ct. Dunnellon, I	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SIMON CORDERY	2818 SW 132nd Ter. Archer, Fl. 32	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated 07/24, 2018

Signature of a member or author

Signature of a member or authorized representative of a member

Typed or printed name of signee