## 118000167581

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<del>f)</del>
PICK-UP	☐ WAIT	MAIL
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	cument Number)	
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Certified Copies	_ Certificates o	of Status
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SECRETARY OF STATE OF STATE OF CORPORATIONS

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## **COVER LETTER**

CUDIECT.	Bayberry Co	ottages, LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	l Articles of a	Amendment and fee(s) are sub-	nitted for filing.	
Please return	all correspo	ndence concerning this matter t	to the following:	
		Matthew Rosenfeld		
			Name of Person	
		Bayberry Cottages, LLC		
			Firm/Company	
		3642 Sumerwind Cir		
			Address	
		Bradenton, FL 34209		
			City/State and Zip Code	
		rosenfeld.matthewb@gmail.		
		E-mail address: (t	o be used for future annual report notific	cation)
For further in	nformation co	oncerning this matter, please ca	II:	
Matthew Ro	senfeld		914 204-1941 at ( )	
	Name of	Person		Telephone Number
Enclosed is a	a check for th	e following amount:		
■ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

Bayberry Cottages, LLC		
( <u>Name of the Limited Lial</u> (A Flor	pility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L18000167581	Company were filed on July 11th, 2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
The new name must be distinguishable and contain the words "I	imited Liability Company," the designation "LLC" or th	e abbreviation
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	<u> </u>
		RY COR
		POR
Enter new mailing address, if applicable:		1: <b>2</b>
Mailing address MAY BE A POST OFFICE BOX)		9 %
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		•
3. If amending the registered agent and/or re		er the name of the n
egistered agent and/or the new registered office a	ddress here:	
Nove of New Designand Assess		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<u> </u>	, 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	Matthew Rosenfeld	3642 Summerwind Cir	
		Bradenton, FL 34209	■ Remove
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			Remove
			Change
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ective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or more that:  If the date inserted in this block does not meet the applicable statutory filing recomment's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective time he 90th day after the record is filed.	e, at 12:01 a.m. on the ear	lier o
red 7/12/18		

Page 3 of 3

Typed or printed name of signee

Matthew Rosenfeld

Filing Fee: \$25.00