118000274054

(Requestor's Name)	
(Address)	
(Address)	_
(188,000)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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COVER LETTER

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TO: Registration Sect Division of Corpo			9,
Division of Corpe	rations		* 15
subject: <u>1601</u>	CAROLYN O	ct LLC ited Liability Company	- Control of the cont
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	The contract of the contract o
	Ric	ARDO LESLIE	
		Name of Person	
			
		Firm/Company	
	7802 Kin	OSPOINTE PK	WY SuitEZO8A
	,	•	
	ORIANDO	F 32819	
	<u> </u>	City/State and Zip Code	
	KI CARDO LE	ISLIE & GMAIL C	0 M
	n-man address. (to be used for future annual report north	zanom
For further information con	cerning this matter, please ca	all:	
·	1 1:-	701 11/10	e 3 7 7
	LESLIE	at (<u>786)</u> 449 Area Code Daytime	- > + 3 4
Name of F	erson	Aren 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	☐ \$60.00 Filing Fee. Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)

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**

1601 CAROLYN CT LLC

ARTICLE	-	MENDMENT	•	
ARTICLES	TC OF OI) RGANIZATIO	N	2
	OF		•	\$700 B
1601 CAROLYN	ct	LLC		THE STATE OF
(<u>Name of the Limited Liabili</u> (A Florida	ity Compani a Limited Li	<u>y as it now appears on</u> ability Company)	our records.)	76. 76.
The Articles of Organization for this Limited Liability C Florida document number <u>L 18000274054</u>		vere filed on <u>NO</u>	V 27-20	118 and assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited lia <u>bil</u>	ity company here:		
1611 CAROLYN CT LLC				
The new name must be distinguishable and contain the words "Lim	nited Liabilit	y Company," the design	ation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(<u>Principal office address MUST BE A STREET ADDE</u>	<u>RESS)</u>			-
		-		· · · · · · · · · · · · · · · · · · ·
Enter you mailing address if applicables				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
(Manual dauress WAT DE A 1031 OFFICE DOA)				
B. If amending the registered agent and/or registered agent and/or the new registered office add			r records, <u>ente</u>	er the name of the new
registered agent analysis the new registered writes and	ir ess nere.	•		
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Florida x	ireer address	
			, Florida	Zip Code
Non-Basinand Assay Cine Assay if the ratio Design		City		Zip Code
New Registered Agent's Signature, if changing Registere			to the state of	and the state of
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete p igent as pr ed office a	performance of my ovided for in Chap	duties, and Lan ner 605, F.S. O	n familiar with and Or, if this document is
	If Chang	ting Registered Agent,	Signature of New	Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being adde or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			□ Change
			□ Remove
			☐ Change
		Add	
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Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	FEB 5 Signature of a member or authyrized representative of a member
	RICARDO LESLIE

Page 3 of 3

Filing Fee: \$25.00