

1/15/2019

L1900001182

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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((H190000165993)))



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To:

Division of Corporations
Fax Number (850)617-6383

From:

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Account Number: 120090000089
Phone: (904)543-4300
Fax Number: (904)543-4301

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Vcimmus@Taxfirm.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NFYS SALE, LLC

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A. LUNT

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Corporate Filing Menu

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H1900006599

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

19 JAN 16 AM 9:55
RECEIVED FLORIDA
SECRETARY OF STATE

NFYS SALE, 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 01/09/2019 and assigned
Florida document number L19000011182

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)

4745 Sutton Park Court

Suite 102

Jacksonville, Florida 32224 US

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4745 Sutton Park Court

Suite 102

Jacksonville, Florida 32224 US

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:

New Registered Office Address:

Enter Florida street address

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

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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	Cassel, George		☐ Add
			☐ Remove
		4745 Sutton Park Court, Suite 102 Jacksonville, Florida 32224 US	☒ Change
AMBR	Richardson, Michael C.		☐ Add
			☐ Remove
		4745 Sutton Park Court, Suite 102 Jacksonville, Florida 32224 US	☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

JAN 06 AM 9:50
 JACKSONVILLE, FLORIDA

H19000016599

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

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

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 January 15

301

Signature of a member or authorized representative of a member

John S. Duss, IV, Authorized Representative

Typed or printed name of signer.

#19000016599



January 16, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

NFYS SALE, LLC
136 LATERRA LINKS CIRCLE
UNIT 201
SAINT AUGUSTINE, FL 3209205

SUBJECT: NFYS SALE, LLC
REF: L19000011182

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Agnes Lunt
Regulatory Specialist III

FAX Aud. #: B19000016599
Letter Number: 919A00001208

2019 JAN 16 AM 10:10