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D CUSHING

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: White Sand Builders of Destin; LLC
Name of Limited Liability Company

Amendana marking address in Dess Registered

Amending mailing address + New Registered agent

The enclosed Articles of Amendment and fee(s) are submitted for filing.

3

Please return all correspondence concerning this matter to the following:

	Charles C.	Wheeler Jr. Name of Person		
	White San	d Builders of I	Destin LLC	
(mailing)	P.O. Box 69.	Address P	hysical only) 310 U Build Destin, F1.	innings Why ? 8 apt 206
	Miramar Blan	Ch FL. 32550 City/State and Zip Code	Destin, Fl.	US 325
	Cincly Wheel Drail address:	er 0530@ ama	the Com	٤
For further information co	ncerning this matter, please co	ill:		15 15 15 15 15 15 15 15 15 15 15 15 15 1
Lindy Whe	Person	at (<u>318</u>) <u>282</u> Area Code Daytii	ne Telephone Number	1861 ATK 186
Enclosed is a check for the	: following amount:		,	OF STAT OF STAT EPODATI
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	\$60,00 Filing Fee. Certificate of Status &	SXS D OXS

(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recor Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 19000 22949</u> .	were filed on <u>8Am Jan</u>	29, 2019 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		7 50
Enter new mailing address, if applicable:	P.O. Box 1694	3 972 <u>1</u>
(Mailing address MAY BE A POST OFFICE BOX)	Miramar Bear	Lh, FL 32558 38
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our recorde:	ds, enter the name of the new
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida street addre	255
		lorida
	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>Address</u> Type of Action <u>Title</u> **Name** Les Country Drive East Drive Destin FL 32541 Ricky L Rollin AMBR ☐ Remove _□ Change _□ Add ☐ Remove ____ Change □ Add ☐ Remove _□ Change ☐ Change

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If an effe Note:	ve date, if other than the date of filing: (optional) extive 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	ord 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_	March 22 . 2019.
	March 22 . 2019. Charles C. Wheel D. Signature of a member or authorized representative of a member
	Charles C. Wheeler Ir Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

State of Florida Department of State

I certify the attached is a true and correct copy of the Articles of Organization of WHITE SAND BUILDERS OF DESTIN, LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on January 29, 2019 effective January 28, 2019, as shown by the records of this office.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L19000022949.

Authentication Code: 190129110858-600323344056#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty Ninth day of January, 2019



Gemiler Kennedy Secretary of State