L19000024080

(Re	equestor's Name)	
(Ad	Idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Ві	ısiness Entity Nan	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	_

Office Use Only



000323908580

02/04/19--01005--085 **25.00



Anund

FEB 1 1 2019

I ALBRITTON

COVER LETTER

Madison P SUBJECT:	lace Management Company; LI	.C	
SOBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Richard E. Straughn		
		Name of Person	
	Straughn & Turner, P.A.		
		Firm/Company	
	255 Magnolia Ave. S.W.		
		Address	
	Winter Haven, FL 33880		
	Srounds@cassidyhomes.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notific	eation)
For further information	concerning this matter, please ca	all:	
Richard E. Straughn		863 293-3051	
Name (of Person	Area Code Daytime	Telephone Number
inclosed is a check for t	he 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)

MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

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

Madison Place Managament Company, LLC

mpany has been notified in writing of this change.

(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our rec liability Company)	cords.)
The Articles of Organization for this Limited Liability Company Florida document number L19000024080	were filed on 01/29/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabi</u>	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity 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)		- 30 B 77-
		EB_1 PM 4: 22
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		<u>F.</u> 22
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here		ords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	ldress
	City	, Florida
w Registered Agent's Signature, if changing Registered Agent:	·	·
hereby accept the appointment as registered agent and agree		I further garee to comply with the
ovisions of all statutes relative to the proper and complete cept the obligations of my position as registered agent as p	performance of my duties	, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

ing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added for removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR Albert S. Cassidy	Albert S. Cassidy	346 E Central Ave Winter Haven, FL 33880	□ Add
			■ Remove
			☐ Change
MGR Albe	Albert B. Cassidy	346 E Central Ave Winter Haven, FL 33880	
			Remove
			Change
			☐ Remove
			Change
			Add
			□ Remove
			Change
			□ Remove
			☐ Change
			☐ Remove
			☐ Change

	·
1166	described and a described and of films.
(If an effective	date, if other than the date of filing: (optional) re 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
	s effective date on the Department of State's records.
:he recore	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
	th day after the record is filed.
Dated	1.31- 19
<u> </u>	
	Signature of a member or authorized representative of a member
	Mark W. Manuan
	Mark W. Mangen Typed or printed name of signee
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00