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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

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

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BYWOOD COURT ASSISTED LIVING LLC

Certificate of Status	U
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

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DEC 29612019

M. SOLOMON

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COVER LETTER

TO:		istration Sec sion of Corp				Ŕ
		BYWOOD	COURT ASSISTED LIVING I	LLC		•
SUBJE	CT:		Name of Limit	ed Liability Company		
The end	closed	Articles of .	Amendment and fee(s) are subm	nitted for filing		
Please	etuin	all correspo	ndence concerning this matter to	the following:		
			Cheyenne Moseley			
				Name of Person		
			Legalzoom.com, Inc.			
				Firm/Company		
			101 N Brand Blvd Uth Fl			
				Address		
			Glendale, CA 91203			
				City/State and Zip Code	<u> </u>	
			GIACOTIN@YAHOO.COM			
			E-mail address: (to	be used for future aimual	report netification)	
For fur	ther in	itornation c	oncerning this matter, please cal	II-		
Cheye	nne N	loseley			3-0888	
· · ·		Name o	f Person	Area Code	Daytime Telephone	Number
Enclose	ed is a	i check for th	ne following amount:			
		iling Fee	□ \$30 00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy is car	closed) C	60.00 Filing Fee, certificate of Status & certified Copy additional copy is enclosed)
		Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Registra Division Clifton I	T/COURIER ADDR tion Section of Corporations Building ecutive Center Circle	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BYWOOD COURT ASSISTED LIVING LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our recor Liability Company)	<u>(ds.</u>)
The Articles of Organization for this Limited Liability Company	were filed on 10/23/2019	and assigned
Florida document number 1.19000265885	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility 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)		
		<u> </u>
		Σ
Enter new mailing address, if applicable:	torum	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	office address on our recor re:	ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florada street addı	reso
		Horida
	City	Zip Cook
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	

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>	Name	<u>Address</u>	Type of Action
AMBR	Dieula Hippolyte	802 FELIX AVE N LEHIGH ACRES, FL 33971	Add
			☐ Remove
		······································	Change
			
			☐ Remove
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			☐ Add DFC 23
			☐ Change
			5
			□ Remove
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	- C.
Note:	ive date, if other than the date of filing:
ne re Th	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.
	14 122 110
Dated	10/77/19
Dated	Gienel Jacotin Signature of a member or authorized representative of a member

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Filing Fee: \$25.00