# L19000281318

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000397350060

APLIATIANSELTE

2022 NC : - 9 PH 3: 21

# Sunshine State Corporate Compliance Company

# 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/09/2022	_		⇔WALK IN*
ENTITY NAME_Pinecr	rest Pointe, LLC		
DOCUMENT NUMBER		· · · · · · · · · · · · · · · · · · ·	
	**PLEASE FILE THE	E ATTACHED AND RETURN**	
xxxxx	Plain Copy		
	Certified Copy		
	Certificate of Status		
	Certified Copy of Arts Certificate of Good Stan		
	**APOSTILLE' / N	OTARIAL CERTIFICATION**	
COUNTRY OF DESTINA	TTION		
NUMBER OF CERTIFICA	ATES REQUESTED		
TOTAL OWED \$25		ACCOUNT #: I20160000072	2
		S 8 7/10	
Please call Ting at	the above number kor i	ony issues or concerns. Thank you so	much!

## COVER LETTER

TO: Registration 5 Division of Co			
	Pointe, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
	condence concerning this matter		
	Richard S. Webb, IV		
		Name of Person	<del></del>
	Icard, Merrill, et al.		
		Firm/Company	
	2033 Main Street, #600		
		Address	
	Sarasota, FL 34237		
	<del></del>	City/State and Zip Code	<del></del>
	rwebb@icardmerrill.com		
	E-mail address: (	to be used for future annual report notifi-	cation)
For further information	concerning this matter, please of	ali:	
Richard S. Webb, IV		941 366-8100 at ()	
Name	of Person		Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Malling Addr</u> Registration	Section	Street Address: Registration Sect	
Division of	Corporations	Division of Corp	orations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 NOV -9 AM 8: 31

Pinecrest Pointe, LLC			TATE
(Name of the Limites	Liability Compar A Florida Limited L	ny as (t now appears on our records.) Liability Company)	TALEAHASSEE, F
The Articles of Organization for this Limited Lia	bility Company	were filed on November 26, 2019	and assigned
Florida document number L19000281318	<del>,</del>		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liabl	llity company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		1001 Dove St. #185	
(Principal office address MUST BE A STREET	ADDRESS)	Newport Beach, CA 92660	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	1 <u>0x)</u>	1001 Dove St. #185 Newport Beach, CA 92660	
B. If amending the registered agent and/or reagent and/or the new registered office address		address on our records, <u>enter the r</u>	name of the new registered
Name of New Registered Agent: Richard S. Webb, IV			
New Registered Office Address:	2033 Main Stre	et, #600	
TANK AMPINETAN DANIES COMMENTS.		Enter Florida street address	
	Sarasota	, Florida	34237
		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

Title	Name	Address	Type of Action
MGR	Andrew T. Shortt	1001 Dove St. #185	C] Add
		Newport Beach, CA 92660	=Remove
			Change
MGR	Leasco Realty Company, Inc.	1001 Dove St. #185	≅Add
		Newport Beach, CA 92660	□ Remove
			□ Change
			□Remove
			□ Remove
			Change
	<del> </del>		□Add
			□Remove
			Change
<del></del>	<del> </del>		□Add
			Петточе
			Change

· <del></del>					
				<del></del>	
	<del></del>				
				202 <b>2</b>	
				2027 NOV	
				AHA (FE)	
				AN AN	
<del></del>	_ <del>_</del>				i
		<u> </u>		<u> </u>	
	· · · · · · · · · · · · · · · · · · ·				
			<del></del>		
fective date, if other than the da	ate of filing:		(optio	enal)	
on effective date is listed, the date must be ste: If the date inserted in this block	a specific and cannot be	prior to date of filing o	more than 90 days after	filing.) Pursuant to 605.	.0207 ed as
cument's effective date on the Department	irtment of State's reco	ords.			
			4	The COsh day after	. ek.a
ecord specifies a delayed effective d is filed.	late, but not an effecti	ve time, at 12:01 a.r	n. on the earlier of: (o	i ne sour day arter	uic
11/11/	2002				
nted /// 7		·			
			7		

Filing Fee: \$25.00

Typed or printed name of signee