Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000240605 3)))



H200002406053ABCT

p	age. Doing so will g	RELOAD button on your browser from this generate another cover sheet.	020
To:			
•••	Division of Co	rporations	``
		: (850)617-6383	رن
			-43
From:			
	Account Name	: GARDNER BREWER MARTINEZ-MONFORT,	P.A.
	Account Number	: 120060000058	<u> </u>
	Phone	: (813)221-9600	\circ

: (813)221-9611

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

Fax Number

Email Address: ____cbrewer@gbmmlaw.com____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KEYSTONE COMMUNITIES HOLDING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Amend

Electronic Filing Menu

9

 \mathcal{C}

Corporate Filing Menu

Help

(((H20000240605 3)))

COVER LETTER

TO: Registration S Division of Co					
KEYSTO SUBJECT:	NE COMMUNITIES HOLDIN	GS, LLC			
SUBJECT:	Name of Lir	nited Liability Company			
			•		
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Christopher W. Brewer				
		Name of Person	···		
	Gardner Brewer Martinez	-Monfort, P.A.			
		Firm/Company			
	400 North Ashley Drive, S	Suite 1100			
	Address				
	Tampa, FL 33602				
	City/State and Zip Code				
	cbrewer@gbmmlaw.com	to be used for future annual report not	Continue		
For further information (concerning this matter, please c	·	neadon)		
Christopher W. Brewer		813 221-9600			
Name o	of Person	at () Area Code Daytim	e Telephone Number		
Enclosed 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 S Division of C	Section	Street Address: Registration Sec Division of Cor			

P.O. Box 6327

Tallahassee, FL 32314

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

(((H20000240605 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

813 676 8089

KEYSTONE COMMUNITIES HOLDINGS, 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 January 6, 2020 and assigned
Florida document number L20000003621

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)

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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

(((1120000240605 3)))

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>Titie</u>	<u>Name</u>	Address	Type of Action
MGR	Thomas J. Barr	17633 Gunn Hwy, Unit 335	□ Add
		Odessa, FL 33556	■Remove
			□ Change
MGR	Keystone Communities, LLC	17633 Gunn Hwy, Unit 335	
		Odessa, FL 33556	□Remove
			□Change
			□ Add
			□Remove
			© Change
			□Add
			□Remove
			□Change
			□Add
		.	Remove
			□Change
			□Add
			□Remove
			□ Change

(((H20000240605 3)))

		
		
		
		
		
		·
····		
		
Effective date, if other than t	he date of filing: (optional) nust be specific and carmot be prior to date of filing or more than 90 days after filing.) Pu	
(If an effective date is listed, the date n Note: If the date inserted in this	nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Publick does not meet the applicable statutory filing requirements, this date with	irsuant to 605.0207 (3)(
document's effective date on the	Department of State's records.	n not be listed as me
the record specifies a delayed effec- ford is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	0th day after the
Dated July 23	2020	
Dated	P) 72 -	
	Coll. Just	
	Signature of a member or authorized representative of a member	
Christopher W. Brew	er	
·	Typed or printed name of signee	