LZ0 000010406

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





800339893388

01/30/20--01010--007 **25.00



FEB 2 7 2020 S. YOUNG

COVER LETTER

TO: Registration Section of Corp.			
SUBJECT. Lec	gacy Loft L	LC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Lauren Bl	ack	
		Name of Person	
	Ligary La	Firm/Company	
	5236 SW	Landing Creek I)r,
		Address	
	Palm City,	City/State and Zip Code Lauren @ LegacyLo to be used for future annual report notifi	
		City/State and Zip Code	
	F-mail address: (Lauren @ LegacyLo	tt. Com
			Catomi
_	ncerning this matter, please ca	aii:	
Lauren Bla	cic	at (772) $999-5$ Area Code Daytime	158
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	☐ \$30.00 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)
Mailing Address	:	Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	ey Laft	LLC	i	2020 J
(<u>Name of the Limite</u>)	d Liability Compan A Florida Limited Li	<u>y as it now appears on o</u> ability Company)	يز (<u>ir records.</u> نز نز	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
The Articles of Organization for this Limited Lia	bility Company v	vere filed on $12/3$	0/2019	and assigned
Fioritia document number	· · · · · ·		Š	356 -
This amendment is submitted to amend the follow	wing:			79.98° C
A. If amending name, enter the new name of	th <u>e limited liabil</u>	ity company here:		
The new name must be distinguishable and contain the wo	rds "Limited Liabilit	y Company," the designat	ion "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	hlo			
(Principal office address MUST BE A STREET				
(Frincipal office agaress MOST BE A STREET	ADDRESSI			
				
Paterna and the state of the st				
Enter new mailing address, if applicable:	LOV)			
(Mailing address MAY BE A POST OFFICE B	<u>:0.x)</u>			
B. If amending the registered agent and/or re agent and/or the new registered office address	*.*	ldress on our record	s, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:		Black		
New Registered Office Address:	5236	SW Landing		Dr.
	/	Enter Florida stra		(T)
	Yalm (ity	Florida _	34990
		(A)		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>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Lauren Black	5236 SW Landing Crui	_Dr. □Add
		Palm City, FL 34990	□Remove
		(change from P to AMBR)	hange
	Joshua Black	5236 SW Landing Creek	Dr. 🗆 Add
		Palm City, FL 34990	KRemove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			DChange
			□Add
			□Remove
			E17.11

_	
_	
••	
-	
-	
-	
-	
•	
-	
-	
-	
-	
-	
-	
20	give date, if other than the date of filing: $01/01/2020$ (ontional)
11641	tive date, if other than the date of filing:(optional) (optional) Tective 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
an ctì <u>ote:</u>	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
an cfl ote: ocun recoi	nent's effective date on the Department of State's records. rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
an cflote: lote: ocum recor	nent's effective date on the Department of State's records. rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
an cflote: lote: ocum recor	nent's effective date on the Department of State's records. rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
an cfl locur record	nent's effective date on the Department of State's records. rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the