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

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## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	TONE FOUNDATION FLOR	IDA LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Naugle A Gibson Jr		
		Name of Person	
	CORNERSTONE FOUND	DATION FLORIDA LLC	
		Firm/Company	-
	2406 WOODSIDE DRIVE		
		Address	_ <del></del>
	LEESBURG, FL 34748		
		City/State and Zip Code	····
	E-mail address: (	to be used for future annual report notif	fication)
For further information c	oncerning this matter, please co	all:	
Naugle A Gibson Jr			
Name o	f 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 Fitting For , Certificate of Standa & Certifical Compositional conditions and denote the conditional conditions.
<u>Mailing Addres</u> Registration Division of C	Section	<u>Street Address:</u> Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### CORNERSTONE FOUNDATION FLORIDA 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  $\frac{02/05/2020}{1}$ and assigned Florida document number  $\frac{1.20000042722}{}$ 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 "LLC." 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

#### 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 hab... y company has been notified in writing of this change.

City

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
MGR	Naugle A Gibson Jr	2406 Woodside Drive	∃Add
		Leesburg FL 34748	
			□Add
			□Remove
			(☐Change
			::Ramove
			□Add
			☐Remove
			☐ Change
			□Add
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			ElRumove

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ffective date if other than	the date of filings			(antiana)	
ffective date, if other than an effective date is listed, the date iote: If the date inserted in thi ocument's effective date on the	s block does not meet t	the applicable statut	iling or more than 90 da, tory filing requirement	nge fhing ) Common o to s, this date will not be li	€5.0207 ( sted as t
record specifies a delayed effe Lis filed.	ctive date, but not an e	ffective time, at 12:	:01 a.m. on the earlier	of: (b) The 90th day af	ter the
04/04 Pated	20	20			
	Signature of a memb	•			
	' <b>΄</b> Ω.				

Typed or printed name of signee