## L20 0000 44827

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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(Do	cument Number)	)
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Amend

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## **COVER LETTER**

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TO:

Registration Section

**Division of Corporations** 

Suntree Co	mmunity Management, LLC		
SOBJECT.	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:	
	Michael L. Jones		
		Name of Person	
	Michael L. Jones, P.A.		
	<del>-</del>	Firm/Company	
	3134 N. Boulevard		
		Address	<del> </del>
	Tampa, FL 33603		
		City/State and Zip Code	
	mikelj131@gmail.com		
	E-mail address: (	to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
Michael L. Jones		813 300-9738 at ()	
Name e	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>
Mailing Address Registration 1 Division of C P.O. Box 632	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of	rporations Tallahassee
Tallahassee, FL 32314		2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim		any as it now appears on Liability Company)	our records.)
The Articles of Organization for this Limited Florida document number $\frac{1.20000044827}{1.20000044827}$	Liability Company	were filed on $\frac{02/07/2}{}$	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lial	bility company here:	
N/A	_		
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	N/A	-
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		2000 万
Enter new mailing address, if applicable:		N/A	2 1
(Mailing address MAY BE A POST OFFICE BOX)			9
B. If amending the registered agent and/or agent and/or the new registered office addr		address on our recor	ds, enter the name of the new registo
Name of New Registered Agent:	N/A		<u>-</u>
New Registered Office Address:		Enter Florida si	reet 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

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
AR	Louis Desantis	2931 Macalpin Dr. S.	Add
		Palm Harbor, FL 34684	□ Remove
			□Change
		-	□Add
		_	□Remove
			□Change
			□Add
		<del>_</del>	□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
		<del></del>	□ Add
		<del></del>	□Remove
			□Change

D. If amending any other information, enter change(s) here:	(Attach additional sheets,	if necessary.)
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Enclosed herein please find documents amending the articles of organization for Suntree Community Management, LLC, to add Louis Desantis as an authorized representative. The articles of organization, as amended, should now reflect that Jeff Couturier and Louis Desantis are Suntree Community Management, LLC's authorized representatives I have enclosed the

fī	ling fee.
. Pl	lso enclosed herein please find IRS Form SS-4 establishing the Federal Employer lentification Number for Suntree Community Management, LLC, as: 84-4912260. ease be so kind as to register this information on Suntree's sunbiz.org website page, hich may be located via Document Number L20000044827.
Note: If the da	(date of filing)  (optional)  e 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 (3)(b) te inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ective date on the Department of State's records.
If the record sp (b) The 90th d	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ay after the record is filed.
Dated February	25 25 29
	Signature of a member or authorized representative of a member
Mich	nael L. Jones, Attorney for Sunyee Community Management, LLC and AR Jeff Couturier

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Typed or printed name of signee