

L20 000048273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

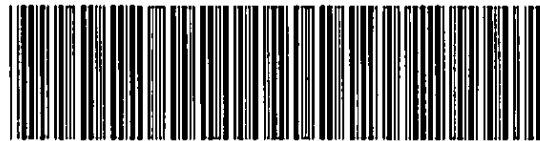
(Business Entity Name)

(Document Number)

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2020 FEB 24 PM 1:43

ED

C. GOLDEN

MAR 14 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Fox Den Properties LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chase Clark

Name of Person

Fox Den Properties LLC

Firm/Company

5470 East Busch Blvd #452

Address

Temple Terrace, FL 33617

City/State and Zip Code

chase@falconinvestment.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chase Clark

813

789-4130

at (_____) _____

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

☐ \$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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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**

Fox Den Properties LLC

2020 FEB 24 PM 1:43

(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 2/11/2020 and assigned
Florida document number L20000048273.

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)

13343 N 56th Street

Tampa, FL 33617

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5470 East Busch Blvd #452

Temple Terrace, FL 33617

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:

Chase Clark

New Registered Office Address:

5470 E Busch Blvd #452

Enter Florida street address

Temple Terrace

Florida 33617

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jonathan Fox	16512 Lake Heather Drive	<input checked="" type="checkbox"/> Add
		Tampa, FL 33618	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Chase Clark	2511 Pemberton Creek Drive	<input checked="" type="checkbox"/> Add
		Seffner, FL 33584	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Peter Murphy	18712 Hanna Road	<input checked="" type="checkbox"/> Add
		Lutz, FL 33549	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Sarah A Fox	16512 Lake Heather Drive	<input type="checkbox"/> Add
		Tampa, FL 33618	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: 02/19/2020 (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated February 19 2020



Signature of a member or authorized representative of a member

Chase Clark

Typed or printed name of signee