## L20 000055330

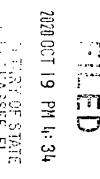
(Requ	estor's Name)	<del></del>
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PICK-UP	☐ WAIT	MAIL
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(Docu	ment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fil	ing Officer:	





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11/20/20

## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	Affordable Manager LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jeffrey C Steinert		
		Name of Person	
	Jameson Pepple Cantu PU	I.C	
	-	Firm/Company	
	801 2nd Avenue, Suite 700	9	
		Address	
	Seattle, WA 98104		
		City/State and Zip Code	
	JSTEINERT@JPCLAW.CO		<del></del>
		to be used for future annual report notif	ncation)
For further information c	oncerning this matter, please c	all:	
Jeffrey C Steinert		206 625-9984 at ( )	
Name o	f Person		e Telephone Number
Enclosed is a check for the	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 Addres		Street Address:	
Registration S Division of C		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

Timuquana Affordable Manager LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) .iability Company)	)
The Articles of Organization for this Limited Liability Company	were filed on February 18, 2020	and assigned
Florida document number L.200000055330		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	<del></del>
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	020
		8 7
		5 7
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		Es E
		<u> </u>
		111 -
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter th</u>	ne name of the new register
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida street address	
	Flor	
	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 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

Title	<u>Name</u>	Address	Type of Action
MGR	51T Affordable LLC	5403 West Gray Street	□Adđ
		Tampa, FL 33609	≣Remove
			□Change
MGR 51 Affordable LLC	5403 West Gray Street	■Add	
		Tampa. FL 33609	□Remove
			□Change
			Add 200 OF Remove
			Change Ch
			Remove
			□Change
			□Add
			□Remove
		Change	
		□Add	
		<del></del>	□Remove
			□Change

19 PI					<del></del>
Effective date, if other than the date of filing:  [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 605.020  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The 90th day after 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 rid is filed.  Dated  October 6.  2020  Signature of a member or authorized representative of a member					
Effective date, if other than the date of filing:  [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 605.020  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The effective date on the Department of State is records.  The 90th day after the red is filed.  Dated  October 6.  2020  Signature of a member or authorized representative of a member					
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	Dated		·		
		WHI			
Paul C. Fortino, Manager		Signature of a member or auth	norized representative of a membe	<u> </u>	<del></del>
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Filing Fee: \$25.00