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(R	equestor's Name	:)
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DIVICION OF CONTRACTOR

JUN 0 7 2021 R. HUNT

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Win 5 far Argui fecture LC Name of Limited Liability Company	
Name of Limited Lizbility Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
John Milner III Name of Person	·
Name of Person	
Winsfar Anguitecture LLC	
t ti ili Cogripany	
484 Jordan Styart Circle Ap.	<u>+110</u>
Apopka FL 32-703 City/State and Zip Code	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
John Milner III at (
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
★\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Fil	ing Fee.
Certificate of Status Certified Copy Certificate of Certified Copy (additional copy is enclosed) (additional copy	Status &
Mailing Address New Filing Section Street Address New Filing Section Division	
Division of Corporations The Centre of Tallahassee	
P.O. Box 6327 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WinStar Propertie	s, cc
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v	were filed on 5-6-20 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil Winstar Arguitecture The new name must be distinguishable and contain the words "Limited Liability".	
The new name must be distinguishable and contain in words. Chance Claim	
Enter new principal offices address, if applicable:	284 Jordan Stuart Chile
(Principal office address MUST BE A STREET ADDRESS)	484 Jordan Stuart Circle Apt 110 Apopka FL 32703
Enter new mailing address, if applicable:	484 Jordan Stuart Circle Apt 110 Apopka FL 32703
(Mailing address MAY BE A POST OFFICE BOX)	- Apopka FL 32703
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: John	milner III
New Registered Office Address: 484	Jurdan Stuart Circle Aptala Emer Florida street address
Apq	OKA , Florida 32 703 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must contain the words "Limited Liability Compan	of the FLC. iv. "L.L.C" or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limit	
Principal Office Address:	Mailing Address:
484 Jordan Stuart Circle Apt 110 Apopka Pt 32703	Same
1444 110 1446PICA 16 33 163 =	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent another business entity with an active Florida registration.)	nt. You must designate an individual or
The name and the Florida street address of the registered agent are: John Milns Name N	er /// Vart Crede Apt 110 Tacceptable) 32703
484 Jordan 54 Florida street address (P.O. Box NO	er /// Vart Crede Apt 110 P
Apopka Fi	32703 Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating 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..

(CONTINUED)

red Agent's Signature (REQUIRED)

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 Type of Action Address Name Title MGR John Milner III 484 Jordan Stuart GReletandd

Apt 110
Hapopka FC 32703

Remove _____ Change MGR Anthony J Baillie 1304 Holly Glen Run DAdd

Apopka, Fl 32703 (Remove) _____ Change ☐ Change □ Remove _____ □Remove

_____ □Change

Title: "AMBR" = Authorized Member "MGR" = ManagerMGR	Nome and Address: John Milner III 484 Jurdan Stuart Circle Apt 110 Agopka M 32703
(Use attachment if necessary)	
CLE V: Effective date, if other than the dateffective date is listed, the date must be steed filing.) If the date inserted in this block does not becoment's effective date on the Department.	nte of filing: 3-17-2021. (OPTIONAL) specific and cannot be more than five business days prior to or 90 days at meet the applicable statutory filing requirements, this date will not be list nt of State's records.
CLE V: Effective date, if other than the date effective date is listed, the date must be steed of filing.) If the date inserted in this block does no seument's effective date on the Department of the CLE VI: Other provisions, if any.	of meet the applicable statutory fiting requirements, this date will not be lis
CLE V: Effective date, if other than the date effective date is listed, the date must be steed filing.) If the date inserted in this block does not cument's effective date on the Department of the Department of the VI: Other provisions, if any.	of State's records.
CLE V: Effective date, if other than the date effective date is listed, the date must be steed filing.) If the date inserted in this block does not becoment's effective date on the Department of the Department	at meet the applicable statutory fiting requirements, this date will not be lis not of State's records.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Winster Properties, LLC will no
longer be in Business New Company
longer be in Business, New Company name will be Winstar Anguitecture, LCC
Manager/Owner will now be John Milner III
Please remove anthony J. Baillie from
Winster Properties, he will no longer be
a Manosoer/Owner.
E. Effective date, if other than the date of filing: (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)(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 3-17- 2021 Signature of a member or authorized representative of a member
ANTHONY 5 BAILLIE Typed or printed name of signee

Electronic Articles of Organization For Florida Limited Liability Company

L20000123069 FILED 8:00 AM May 06, 2020 Sec. Of State thampton

Article I

The name of the Limited Liability Company is: WINSTAR PROPERTIES, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

1304 HOLLY GLEN RUN APOPKA, FL. 32703

The mailing address of the Limited Liability Company is:

1304 HOLLY GLEN RUN APOPKA, FL. 32703

Article III

The name and Florida street address of the registered agent is:

HAYDEE BAILLIE 1304 HOLLY GLEN RUN APOPKA, FL. 32703

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: HAYDEE BAILLIE

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR ANTHONY J BAILLIE 1304 HOLLY GLEN RUN APOPKA, FL. 32703 L20000123069 FILED 8:00 AM May 06, 2020 Sec. Of State thampton

Article V

The effective date for this Limited Liability Company shall be:

05/01/2020

Signature of member or an authorized representative

Electronic Signature: ANTHONY J BAILLIE

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.