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2021 SEP 21 AM 5: 34 SECRETARY OF SIGH

COVER LETTER

TO:

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SUBJECT:			s lic
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Linda Leigh	Name of Person	 -
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:			
	IL RIKER	Address	
	_		
For further information c			
	Cerson	at (<u>912</u>) <u>655</u> - Area Code Daytim	5650 e Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration :	Section	Registration Se	
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P.O. Box 632 Tallahassee,			e Street, Suite 810
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

FILED

CHARLESTON COURT APARTMENTS LLC

2021 SEP 21

SEORETARY OF STATE (Name of the Limited Liability Company as it now appears on our records LLAHASSEE, FILE (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability (Florida document number <u>L26006268466</u>	Company were filed on 7/17/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	16 Riker Ave.
Principal office address MUST BE A STREET ADD	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:	LL Riker Ave. Santa Rosa Beach, FL 32459 ed office address on our records, enter the name of the new registered
Name of New Registered Agent:	LARRY WALSH
New Registered Office Address:	ll Riker Ave. Enter Florida street address
_Sav	He Bose Beach Florida 32459 Zip Code
New Registered Agent's Signature, if changing Register	ed 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

It 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
MCR	DUANE Wilson	CO East Willow Mist Rd.	LJAdd
		Inlet Beach, FL 32461	Remove
			□ Change
MGR Larry Walsh	Larry Walsh	16 Riker Ave	XIAdd
		IL Riker Ave Santa Rosa Beach, FL 324	59_ □Remove
			ClChange
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an ef lote:	tive date, if other than the date of filing:
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record is fi	rd 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 iled.
)ated	September 14 2021
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	Signature of a member or authorized representative of a member