Division of Corporations Electronic Filing Cover Sheet

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(((H20000408903 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: BLALOCK, WALTERS, HELD & JOHNSON, P.A. Account Name

Account Number : 076666003611

: (941)748-0100

Fax Number : (941)745-2093

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

jill@nsii.net Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 227 GRANT LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

227 Grant LLC		
(Name of the Limited Liability Compa (A Florida Limited )	iny as it now appears on our reco Cability Company)	ords.)
The Articles of Organization for this Limited Liability Company	were filed on 11/18/20	and assigned
Florida document number L20000357476		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ollity company here:	
The new name must be distinguishable and contain the words "Limited Lisbi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		109
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
<del></del> ;		
		ν'n
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new registere
agent and of the non-regions		
Name of New Registered Agent:		
New Registered Office Address:	<u></u>	
	Enter Florida street add	ress .
		Florida
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	į	
I hereby accept the appointment as registered agent and agr	ree to act in this capacity. I	further agree to comply with the

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

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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
MGR	John L. Hutchens	5391 Lakewood Ranch Blvd., Suite 100	□bbA
		Sarasota, Florida 34240	■Remove
			Change
MGR	BFAB Real Estate LLC	5391 Lakewood Ranch Blvd., Suite 100	□Add
		Sarasota, Florida 34240	\exists Remove
			Change
MGR	Real Estate Ventures, LLC	5013 Fieldling Lane	□Add
		Sarasota, Florida 34233	≘Remove
			□Change
			□Adđ
			Change
			□Add
			□Remove
			Change
		<del></del>	□Add
			□Remove
			□ Change

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D. If amending any other information, enter change(s) here: (Attach addition	al sheets, if necessary.)	
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		_
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 mor  Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	(optional) re than 90 days after filing.) Pursuant to o requirements, this date will not be l	605 0207 (3)(t isted as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. or ecord is filed.	n the earlier of: (b) The 90th day a	fter the
Dated 11-30 2020		
// /// <b>///                           </b>		

Filing Fee: \$25.00

Typed or printed name of signee

John Hutchens, Authorized Representative