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Office Use Only

## **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: LEGACY MILL CREEK, 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:

John Troutman Name of Person Legacy Mill Creek, LLC Firm/Company 26011 Via Viento Address Mission Viejo, CA 92691 City/State and Zip Code jtroutman@richlandinvestments.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John Troutman 949 383-4131 at (\_\_\_\_\_ Area Code Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & \$60,00 Filing Fee. □ \$25,00 Filing Fee □ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

<u>Mailing Address:</u> 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

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LEGACY MULL CREEK, LLC	<b>21</b> 300 1	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Rability Company)	<u> </u>
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the a	ubbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BON)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the nan</u>	<u>ne of the new register</u>
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	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, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = M			
AMBR = A	Authorized Member	Address 21 JUN-1 AMII: 0	2
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JOHN C. TROUTMAN	3161 Michelson, Ste. 425	ƏAdd
		Irvine, CA 92612	ERemove
			□Change
AMBR	RICHLAND WESTLAKE, INC.	400 N. Ashley Drive, Ste. 1750	Add 🗐
		Tampa, FL 33602	Петюче
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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.

May 25th 2021 Dated \_\_\_\_ 0 Signature of a member or authorized representative of a member

John C. Troutman

Typed or printed name of signee