

L21000058627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

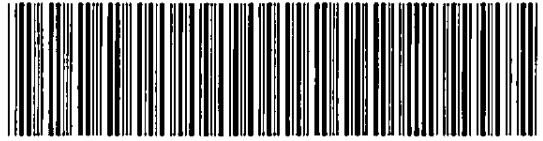
(Business Entity Name)

(Document Number)

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2024 MAY 17 AM 7:17
STATE
OFFICE

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SOUTHERN PALM HOME WATCH, 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:

Charles C. Jones, II

Name of Person

Jones, Haber & Rollings

Firm/Company

1633 SE 47th Terrace

Address

Cape Coral, Florida 33904

City/State and Zip Code

jones@joneshaberlaw.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon Cirillo

at (239) 542-0700

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SOUTHERN PALM HOME WATCH, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

2024 MAR 17 AM 7:18

The Articles of Organization for this Limited Liability Company were filed on February 2, 2021 and assigned
Florida document number L21000058627.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: TROY CARR

New Registered Office Address: 2728 NE 7th Avenue
Enter Florida street address

Cape Coral, Florida 33909
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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Derryl D. Fewins	4109 SE 19th Avenue, Unit 107	<input type="checkbox"/> Add
		Cape Coral, Florida 33904	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Troy Carr	2728 NE 7th Avenue	<input checked="" type="checkbox"/> Add
		Cape Coral, Florida 33904	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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