LZI 000142457

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
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COVER LETTER

TO: Registration Se Division of Cor			
	VILLE RESIDENTIAL LLC	•4	
SUBJECT:	Name of Lim	ited Liability Company	- ,
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	NICOLE JENKINS		
	•	Name of Person	
	LANSING MELBOURNI	E GROUP	
		Firm/Company	
	1116 HEATHER OAK LA	ANE	
		Address	
	OAKBORO NC 28129		
		City/State and Zip Code	
	njenkins@lmgroup.us		H()
For further information c	oncerning this matter, please c	to be used for future annual report notifiall:	Resitor)
Nicole Jenkins		704 219-9232	
Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration Section Division of Corporations		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOORESVILLE RESIDENTIAL LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 03/26/2021	and assigned
Florida document number L21000142457		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
MOR MF 100 CHURCH LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	101 NE 3RD AVE	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 1500	2022 SEC
	FORT LAUDERDALE, FL. US 33301	CR CR
Enter new mailing address, if applicable:	1290 W EAU GALLIE BLVD	AUG 22 RETARY
(Mailing address MAY BE A POST OFFICE BOX)	MELBOURNE FL 32935	2 655
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name	2 30 E 7 1 30
New Registered Office Address:	F . F	
	Enter Florida str ee t address	
	, Florida	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Add
			□Remove
			□Add
			C Remove
			☐ Change
			□Add
			□Remove
			□Add
			□ Rетюче
			□Add
		-	🗆 Remove

_____ □Change

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effective date, if other than the date of filing:	S 6202 (2)41 (
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lis document's effective date on the Department of State's records.	ted as the
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	er th e
cord is filed.	
Dated	
Signature of a member or authorized representative of a member	
Typed or printed name of signer	

Filing Fee: \$25.00