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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Registration Section Division of Corporations

Grahame Family Custom Home Builders, LLC

SUBJECT:

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:

Carol M Purdy

Name of Person

Grahame Family Custom Home Builders, LLC

Firm/Company

1231 County Road 283 S

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

carol@oversee.us

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

For further information concerning this matter, please call:

Carol M Purdy 404 931.9992 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)

<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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Grahame Family Custom Home Builders, LLC

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

The Articles of Organization for this Limited Liability Company were filed on <u>April 9, 2021</u> and assigned Florida document number <u>L21000164829</u>

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 "LLC."

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)	
	(7) -

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

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	ddnxss
	City	, Florida Zyp 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. <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

. .

MGR = Manager AMBR = Authorized Member

,

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<u>Title</u>	Name	Address	Type of Action
MGR	KDHR Management, LLC	1231 Co Road 283 S	□Add
		Santa Rosa Beach, FL 32459	Remove
		1231 Co Road 283 S	□Change
MGR	KBAG Management, LLC	Santa Rosa Beach, FL 32459	
			🗆 Remove
			Change
		<u></u>	🗆 Add
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			□Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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f an effective date is listed, the date	must be specific and cannot be pri-	or to date of filing or more than 90 da	(optional) ivs after filing.) Pursuant to 605.0207
Note: If the date inserted in thi	s block does not meet the appli	icable statutory filing requireme	nts, this date will not be listed as
locument's effective date on th	e Department of State's record	s.	
e record specifies a delayed effe	ctive date, but not an effective	time, at 12:01 a.m. on the earlie	r of: (b) The 90th day after the
d is filed.			•
July 26	2021		
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<u> </u>	r7]	horized representative of a member	
	Signature of a member or aut	invised representative of a meanor	

Typed or printed name of signee

Filing Fee: \$25.00