2100026034

(Requestor's Name)	
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(Document Number)	
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COVER LETTER

	Registration Se Division of Cor				
SHD IF C		Property Management LLC	•		
SUBJEC1	Name of Limited Liability Company				
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	ırn all correspo	ndence concerning this matter	to the following:		
		Jayci B Holton			
		•	Name of Person	·	
		Kings Gate Property Mana	agement LLC		
			Firm/Company		
		1270 Sutton Trail			
	Address				
		Geneva, FL 32732			
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
		jayciholton@gmail.com			
e e .i			to be used for future annual report n	iotification)	
ror iunnei	r information co	oncerning this matter, please c	aii:		
Jayci Ben	nice Holton		407 754-7165 at ()		
	Name of	f Person	Area Code Day	time Telephone Number	
Enclosed i	s a check for th	ne following amount:			
■ \$25,00	0 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)	
	Lailing Address		Street Address: Registration S	-	
Registration Section Division of Corporations P.O. Box 6327		Division of C			
		•	The Centre of	-	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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

company has been notified in writing of this change.

ARTICLES OF O	
Kings Gate Property Management LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Chability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000260349</u>	$\mathcal{O}_{\mathcal{A}}$
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1015 Oviedo Mall Blvd.
(Principal office address MUST BE A STREET ADDRESS)	Oviedo, FL 32765
Enter new mailing address, if applicable:	1015 Oviedo Mall Blvd.
(Mailing address MAY BE A POST OFFICE BOX)	Oviedo, FL 32765
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 of the new registered
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 provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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>	Address	Type of Action
MGR	Brian M Holton	1270 Sutton Trail	
		Geneva, FL 32732	■Remove
			□Add
			Remove
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	we date, if other than the date of filing:
e recor ord is fil	d 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 ed.
Dated	Signature of a member or authorized representative of a member
	Jayci B Holton
	Typed or printed name of signee

Filing Fee: \$25.00