L2100027814

(Requestor's Name) (Address)	
(Address)	30036955
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	97/23/21 01005-
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	Anichd

Office Use Only



7603

-018 ******25.00

JUL 25 2021 ! ALBRITTON

CORPORATE ACCESS, ____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

		PICK	UP:	7/23 DANNY			
		CERTIFIED COPY					
		CERTIFIED COLI				<u> </u>	
	XX	РНОТОСОРУ					
		CUS					
	XX	FILING	LLC	AMEND			
1.		964 LAKE BALDWIN L		LC			
		(CORPORATE NAME AND DOCUM	IENT #)				
2.							
		(CORPORATE NAME AND DOCUM	ENT#)				
•							
3.		(CORPORATE NAME AND DOCUM	ЕNТ #)				
			,				
4.	,	(CORDODATE MAME AND DOCUM	Darre II.				- <u>-</u>
		(CORPORATE NAME AND DOCUM	ENI#)				
5.							
		(CORPORATE NAME AND DOCUM	ENT#)	-			
6.							
	-	(CORPORATE NAME AND DOCUM	ENT#)				
	CIAI TRU	L CTIONS:					
					<u> </u>		

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: 964 L	ake Baldwin Lane, LLC	, a Florida limited liability o	ompany
		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sui	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Nicholas A. Norder	1	
		Name of Person	
		Firm/Company	
	15540 Sandfield Lo	еор	
		Address	
	Winter Garden, FL		
		City/State and Zip Code	
	nnorden@nordenle E-mail address: (acox.com to be used for future annual report noti	fication)
For further information of	concerning this matter, please of	all:	
Nicholas Norden		352 246-3029 at ()	
Name o	f Person		e Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S		Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

964 L	ake Baldwin Lane, LLC		
(Name of the Limited L.	ability Company as it now appealorida Limited Liability Company)	ars on our records.	
The Articles of Organization for this Limited Liabil	ity Company were filed on _	June 15, 2021	and assigned
Florida document number L21000278143	.		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company h	ere:	
			10.
The new name must be distinguishable and contain the words	"Limited Liability Company," the	designation "LLC" or the abb	reviation L.L.C."
Enter new principal offices address, if applicable	:		·
(Principal office address MUST BE A STREET A	DDRESS)		ignormal in the contract of th
			
			بې
Enter new mailing address, if applicable:			6
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
	<u> </u>	<u> </u>	
			-
B. If amending the registered agent and/or regist agent and/or the new registered office address he	tered office address on our r	records, enter the name	of the new registered
The second state and the second secon	<u> </u>		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida 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 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> Nicholas Alexander Norden	Address	Type of Action
MGR_	Revocable Trust		
		15540 Sandfield Loop, Winter Garden, FL 34787	■Remove
	The Georgia Leacox		
MGR_	Revocable Trust	2442 Farmet Olyk Da	DAdd
		2143 Forest Club Dr. Orlando, FL 32804	■Remove
			Change
MGR	Nicholas Norden	15540 Sandfield Loop, Winter Garden, FL 34787	■Add
			□ Remove
		2142 Forest Club D	□Change
MGR	Georgia Leacox	2143 Forest Club Dr. Orlando, FL 32804	M Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□ Remove
			□ Change

). If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
_	
_	
_	
_	
_	
	
(If an effect Note: If	date, if other than the date of filing:
he record s ord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	July 22 2021
	Signature of a member or authorized representative of a member
	Nicholas Norda Typed or printed name of signee

Filing Fee: \$25.00