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## **COVER LETTER**

TO: Registration Se Division of Cor			
OLUB AN CON	LEGACY AT	T BAY HARBOR LLC	
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	bmitted for filing.	
Please return all correspo	ondence concerning this matter	r to the following:	
		Oscar J. Rodriguez. Esq.	
	-	Name of Person	
Law Offices of Oscar J. Rodriguez, PA			
Firm/Company			
3850 Bird Road. Suite 903			
		Address	
		Miami, FL 33146	
		City/State and Zip Code	
	E-mail address: t	orodriguez@ojrlaw.com (to be used for future annual report notification)	2021
For further information c	oncerning this matter, please c		2021 KOV -5
	odriguez, Esq.	305 442-1991	:
Name o	f Person	Area Code Daytime Telephone Number -	事では、
Enclosed is a check for th	ne following amount:		·.
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee Certified Copy Certificate of Sta (additional copy is enclosed) Certified Copy (additional copy is en	itus &
Mailing Addres Registration S		Street Address: Registration Section	
Division of C	orporations	Division of Corporations	
P.O. Box 632 Tallahassee, I		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
ramanassee, t	TL 34314	2413 IN MIDHIOC SHEEL, SURC 510	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEGACY	' AT BAY HARBOR LLO		
( <u>Name of the Limited Liability</u> (A Florida l	Company as it now appea	rs on our records.)	
(A rionga i	anned maonity Company)		
The Articles of Organization for this Limited Liability Co Florida document number	mpany were filed on	September 22, 2021	and assigned
Tionda document number	<b>-</b> *		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company h	ere:	
LEGACY AT BAY HARBOR, LLC			
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the c	lesignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	ESS)	/	
	<del></del>		
Enter new mailing address, if applicable:			- <del>                                     </del>
(Mailing address MAY BE A POST OFFICE BOX)	-		121
			写. 看
			F3. 1 1
B. If amending the registered agent and/or registered	office address on our r	ecords, enter the nam	්ල් ්ල e of the new registered
agent and/or the new registered office address here:			
			: 1
Name of New Registered Agent:			<u> </u>
Name of New Registered Agent.			7.
New Registered Office Address:			
	Enter Flo	rida street address	
		, Florida	
	Ciny		Zip Code
New Registered Agent's Signature, if changing Registered	Agent:		_
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of ent as provided for in ( l'office address, I herei	my duties, and I am f Chapter 605, F.S.Or, by confirm that the lin	amiliar with and if this document is nited liability
	If Changing Registered Ag	ent, <u>Signature of New Re</u> g	gistered 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 = AMBR =	Manager Authorized Member			
<u>Title</u>	Name	<u>Address</u>	Type of A	ction
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as the	comma was inadvertently left out in	the Articles of Organization.	
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			302
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ffective : If the		d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to meet the applicable statutory filing requirements, this date will not be	
ord spec filed.	ifies a delayed effective date, but not	t an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	after (
t	November 3		
		b	
_	Signature of a	perhor or authorized representative of a member	_

Filing Fee: \$25.00