L21000514718

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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SECRE CAR TO TALL ATTACK

SB7/22/7025

COVER LETTER

FO: Registration S Division of Co		;	. •
V 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Homes, LLC	•	
SUBJECT:	Name of Lin	ited Liability Company	
		X-r	
he enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
lease return all corresp	ondence concerning this matter	to the following:	
	Liz Willenborg		
		Name of Person	<u> </u>
	PO Box 7866	Firm/Company	2023 5 Etc. 1
		Address	SECRET STALL
	Paducah, KY 42002		
	luillanhana Qualdaanisalluu	City/State and Zip Code	
	lwillenborg@goldcapitalky E-mail address: (to be used for future annual report notification)	
or further information	concerning this matter, please c	all:	
iz Willenborg		217 343-3790 at ()	
Name	of Person	Area Code Daytime Telepho	one Number
nclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 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)
34			
Mailing Address Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporatio The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	ssee 1, Suite 810



June 16, 2025

Liz Willenborg PO BOX 7866 PADUCAH, KY 42002

SUBJECT: SL LAKESHORE HOMES, LLC

Ref. Number: L21000514718

We have received your document for SL LAKESHORE HOMES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file. Name through the same distinguishable from

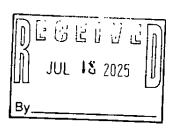
The document number of the name conflict is L11000038008.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN Regulatory Specialist II

Letter Number: 725A00013063



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Lia</u> (A Flo	hility Compa rida Limited l	ny as it now appears on our recor Liability Company)	rds.)	-
he Articles of Organization for this Limited Liabilit lorida document number 1.21000514718				_ and assigned
nis amendment is submitted to amend the following	;			
. If amending name, enter the new name of the l	<u>imited liab</u>	ility company here:		
akeshore Homes (KY), LLC				
he new name must be distinguishable and contain the words "	Limited Liabil	lity Company," the designation "LL	.C" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		3566 Olivet Church Rd	TAI TAI	925 J
		Paducah, KY 42001	<u> </u>	
			77.77	<u> </u>
			, 57	7:5
Enter new mailing address, if applicable:		PO Box 7866	:.	ö
Mailing address MAY BE A POST OFFICE BOX)		Paducah, KY 42002		90
				
. If amending the registered agent and/or registered and/or the new registered office address her Name of New Registered Agent:	<u>e</u> :	address on our records, <u>ente</u> rvice Company	r the name o	f the new reg
Name of New Neglstered Agent.				
New Registered Office Address: 120	11 Hays Stre	et Enter Florida street addre	are.	
	lahassee		ess Torida <u>32301</u>	
T_{n}				

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.

Lyasll Allison

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	Michael T McCann		
		135 2nd Ave., Jacksonville, FL 32250	□ Add
			□Change
MGR	Wayne Golightly	2425 Mayfield Metropolis Rd., Paducah KY 42001	= Add
			□Remove
			□Change
			🗆 Add
	•		□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
		-	□Change
D 			□Add
			□Remove
			□Change

ffective date, if other than the date of filing: April 7, 2025 (optional) an effective date is listed, the date must be specific and examo be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 folicy: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a occurrent's effective date on the Department of State's records. Trecord 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 is filed. April 7 2025 Wagne Journal Signature of a member or authorized representative of a member Wayne Golightly					_
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Filing Fee: \$25.00