

L220000315287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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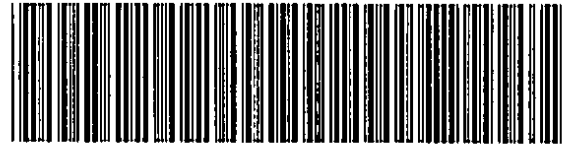
(Business Entity Name)

(Document Number)

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2022 SEP 16 AM 6:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. BUTLER

DEC 12 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Barton Family Investments LLC
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:

Robert Barton
Name of Person

Firm/Company

8551 Summerville Place
Address

Orlando, FL 32819
City/State and Zip Code

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

For further information concerning this matter, please call:

Robert Barton at (407) 902 8516
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)

Mailing Address:
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**

Barton Family Investments, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

APR 6: 53

The Articles of Organization for this Limited Liability Company were filed on 7/15/2022 and assigned
Florida document number L22000315287

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 "L.L.C."

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)

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

Name of New Registered Agent:

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 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

[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated September 9, 2022

Signature of _____

Signature of a member or authorized representative of a member

Robert Barton Mgr.
Typed or printed name of signee

Filing Fee: \$25.00



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Detail by Entity Name

Florida Limited Liability Company
BARTON FAMILY INVESTMENTS LLC

Filing Information

Document Number	L22000315287
FEI/EIN Number	NONE
Date Filed	07/15/2022
Effective Date	07/13/2022
State	FL
Status	ACTIVE

Principal Address

8551 SUMMERVILLE PLACE
ORLANDO, FL 32819 UN

Mailing Address

8551 SUMMERVILLE PLACE
ORLANDO, FL 32819 UN

Registered Agent Name & Address

BARTON, ROBERT S, III
8551 SUMMERVILLE PLACE
ORLANDO, FL 32819

Authorized Person(s) Detail

NONE

Annual Reports

No Annual Reports Filed

Document Images

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