

L22000338713

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

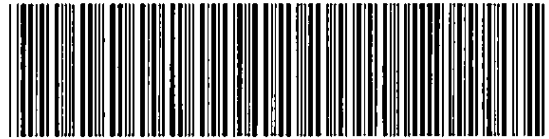
(Document Number)

Certified Copies \_\_\_\_\_

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01/21/21 0102 4:01 PM 4:01 PM

2023 JUN 22 PM 4:20  
FILED  
JUL 1 2023



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 12, 2023

TINA BAACK  
VILLAGES OF SANTA ROSA, LLC  
125 BELLE FOREST CIR, STE 104  
NASHVILLE, TN 37221 US

SUBJECT: VILLAGES OF SANTA ROSA, LLC  
Ref. Number: L22000338713

2023 JUN 22 PM 4:20  
FILE

We have received your document for VILLAGES OF SANTA ROSA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

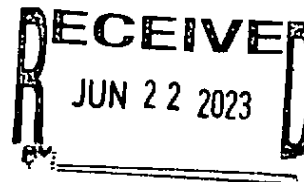
The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Antoinette A Gonzalez  
Regulatory Specialist II

Letter Number: 723A00010892



## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Villages of Santa Rosa, 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:

Tina Baack  
Name of Person  
Villages of Santa Rosa, LLC  
Firm/Company  
125 Belle Forest Cir, Ste 104  
Address  
Nashville TN 37221  
City/State and Zip Code  
tina@libraholdings.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tina Baack at 727 244 5863  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

2021 JUN 12 2 PM 4:20

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

Villages of Santa Rosa, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned  
Florida document number L22000338713.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

n/a  
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)

125 Belle Forest Cir Ste 104  
Nashville TN 37221

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

125 Belle Forest Cir Ste 104  
Nashville TN 37221

**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:

n/a

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


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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Paul Tashie	5235 Shady Grove Rd	<input type="checkbox"/> Add
		Memphis TN 38117	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Judd Tashie	125 Belle Forest Cir SE <sup>104</sup>	<input checked="" type="checkbox"/> Add
		Nashville TN 37221	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 8/5/2022  , \_\_\_\_\_

Signature of a member or authorized representative of a member

Typed or printed name of signee

2022-11-122 Fri: 21

The diagram illustrates the experimental setup. A subject is seated at a computer, viewing a monitor. The monitor displays a visual feedback system with a target area and a feedback signal. The subject is also shown interacting with a physical system, which is connected to the computer via a data acquisition system. The physical system includes a motor and a load.

**Filing Fee: \$25.00**