# 124000086/60

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## **COVER LETTER**

TO: Registration S Division of Co						
SUBJECT: <u>Legend 1</u>	Fownhomes, LLC					
	Name of Lin	nited Liability Company		•		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspondent	ondence concerning this matter	to the following:				
	Hulsc	y Ebanks				
		Name of Person		<del>-</del>		
	Legen	d Townhomes, LLC				
		Firm/Company				
3060 E College Ave 109					() ()	
Address				385 30,	AH	( )
	Russ	kin, FL 33570		STA	758 26 AM 10: 11	C
		City/State and Zip Code	<del>.</del>	¥	=	
	E-mail address: (	to be used for future annual report notif	ication)			
For further information of	concerning this matter, please ca	all;				
Hulsey Ebanks		(912 ) 2/2 51/2				
Name of Person		at ( 813)363-5163_ Area Code Daytime	: Telephone Numbe	er		
Enclosed is a check for the	he following amount:					
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	0.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee.				

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 DocuSign Envelope ID: 3F84DF34-52CB-4F5C-87D3-AD4E12CF97D5

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Legend Townhomes, LLC (Name of the Limited Liability Comp	any as if now appears on our race	rde l	
(A Florida Limited	Liability Company)	rus.)	
The Articles of Organization for this Limited Liability Company	were filed on 11/07/2019 _		_and assigned
lorida document number.			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	.C" or the abbre	viation "L.L.C."
Enter new owner information, if applicable:			; 
Principal office address MUST BE A STREET ADDRESS)		٠.,	Ġ
			ch :
	-	SE	<u> </u>
Inter new mailing address, if applicable:		ES 프런	AH D
Mailing address MAY BE A POST OFFICE BOX)		- LE	_
. If amending the registered agent and/or registered o	ffice address on our recor	ds, enter th	e name of th
	<b></b> -		
Name of New Registered Agent:			
New Registered Office Address:			<b></b>
	Enter Florida street addr	ess	
		lorida	
	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

DocuSign Envelope ID: 3F84DF34-52CB-4F5C-87D3-AD4E12CF97D5
11. amenuing Authorized rerson(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> MGR	<u>Name</u> Francesco Orselli	Address	Type of Action
	Trancesco Orsem		□ Add
			Remove
			□ Change
		<del></del>	□ Remove
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ffective d	ate, if other th	an the date o	f filing:				(optional)		
an effective	date is listed, the d	late must be spec	ific and canno	ot be prior to da	ate of filing or m	ore than 90 day	s after filing.)	Pursuant to	605.0
locument's	date inserted in effective date or	n the Departme	s not meet ti ent of State	ne applicable s records.	Statutory Illin	g requiremen	ts, this date v	vill not be	listed
e record The 90th	specifies a de n day after th	elayed effec ne record is	tive date, filed.	but not a	n effective t	ime, at 12	:01 a.m. d	on the ea	rlier
\	2/23/20	024							
Dated	<del></del> :		·	 DocuSigne	d by:				
				Hulsey	Ebanks				

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Filing Fee: \$25.00