U24000775003

(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:

Office Use Only



000432582500

07/11/24--01008--012 **25.00

2012 JUL 11 AH II: 2

COVER LETTER

TO: r	Registration Sec Division of Corp			•
CHD II	YCT.	Brooksto	one Auburndale, LLC	
SUBJF		Name of Lin	nited Liability Company	
The end	closed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspon	idence concerning this matter	to the following:	
			Leon J. Wolfe	
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		В	rookstone Auburndale, L	LC
			Firm/Company	
			2100 Hollywood Blvd.	
			Address	
			Hollywood, FL 33020	
			City/State and Zip Code	
		Lenny.Wolfe@Cornerston	neGrp.com, Jorge.Lopez@ to be used for future annual	·
V C	1			report notification)
		ncerning this matter, please c	an:	
JJ Johnson, Esq. / Fishback Dominick LLP		407 at ()	262-8400	
	Name of	Person	Area Code	Daytime Telephone Number
Enclose	ed is a check for the	following amount:		
■ \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc	Certificate of Status &
	Mailing Address: Registration So	ection	_	ation Section
	Division of Co	rporations	Divisio	n of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Brookstone Auburndale, LLC	
(Name of the Limited	I Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia Florida document number	bility Company were filed on	and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here:	
Cornerstone Collard Auburndale, LLC		
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET		_
Tricipal office dualess MOST DE A STREET	/IDDI(LSS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
		60 53
B. If amending the registered agent and/or rep agent and/or the new registered office address	gistered office address on our records, <u>enter the name</u> here:	e of the sew registers
agent and/or the new registered write address	- MATE.	
		<u> </u>
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street address	= ::
	, Florida	27
	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or remo	tea ii wai i eew as.		
MGR =	Manager		
AMRD =	Authorized Member		

<u>Title</u>	Name	Address	Type of Action
			Remove
			Change
 -			\ \
			🗆 Remove
			□ Change
			□Add
		-	□Remove
			□Change
			□Add
			Change
			[] Add
			□Remove
			[]Change

						· · · · · · · · · · · · · · · · · · ·	
-							
			<u> </u>				<u>.</u>
						-	
							
					<u> </u>		
							7012
-							
· = ··-·				<u> </u>		•	
							- بريد ما الأسا حد
							: 27
						 	
Note: If the	date, if other than the re date is listed, the date mu- ne date inserted in this b s effective date on the D	ock does not	meet the appli	cable statutory	or more than 90 days Tling requirements	optional) after filing.) Pursua , this date will no	nt to 605.020 t be listed a
record sp d is filed.	ecifies a delayed effectiv	e date, but no	ot an effective	time, at 12:01 a	m. on the earlier o	f: (b) The 90th o	day after th
Dated	June 20		2024	·			
			N	M			
		Signature of a	memberor aut	forized representa	tive of a member		

Filing Fee: \$25.00