

L96 0000000603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

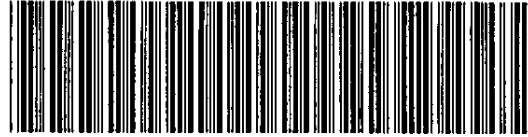
(Business Entity Name)

(Document Number)

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2015 AUG 24 AM 8:27
CLERK OF STATE
TALLAHASSEE, FLORIDA

NO. 3-100-200 AUG 27 2015

SHEFTALL TORRES
A T T O R N E Y S A T L A W

Austin J. Dragoo, Esq.
ADragoo@sheftalltorres.com
Phone: (904)638-3995

August 21, 2015

via U.S. Mail

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

**Re: Articles of Amendment to Articles of Organization of Royal Palms Ranch
Starke, LLC (Document No. L96000000603)**

Dear Sir or Madam:

Attached you will find the Articles of Amendment to Articles of Organization of Royal Palms Ranch Starke, LLC (Document No. L96000000603) (the "Amendment") to be filed in accordance with Section 605.0202, Florida Statutes.

I have also enclosed Sheftall & Torres, P.A. trust account Check **#1004** for **\$25.00** representing payment in full of all applicable filing fees.

Should you need anything further, please do not hesitate to contact me at (904) 638-3995 or ADragoo@sheftalltorres.com.

Best regards,



Austin J. Dragoo, Esq.

Enclosure(s)

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Royal Palms Ranch Starke, 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:

James J. Gilvarry

Name of Person

Firm/Company

13705 SE 139th Avenue

Address

Starke, FL 32091

City/State and Zip Code

JAMESGILVARRY@hotmail.com

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

For further information concerning this matter, please call:

Austin J. Dragoo

904 638-3995
at ()

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

FILED
2015 AUG 24 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Royal Palms Ranch Starke, 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 05/31/1996 and assigned
Florida document number L96000000603.

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)

13705 SE 139th Avenue

Starke, FL 32091

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

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

D: If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

"Article III - Duration" is hereby amended to read as follows:

"The period of duration for the Limited Liability Company shall be:

Perpetual."

FILED
2015 AUG 24 AM 8:28
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ **(optional)**

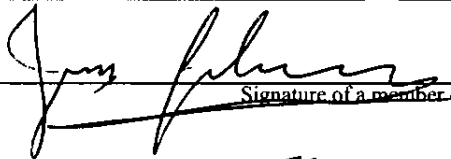
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

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 8-19 _____, 2015



Signature of a member or authorized representative of a member

JAMES GILVARY

Typed or printed name of signee