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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MCLIN & BURNSED P.A.

Account Number : 104657003604 Phone : (352)753-4690

: (352)751-4993 Fax Number

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RANEY HOLDINGS GROVELAND, LLC

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JUN 2 2 2020

Tallahassee, FL 32303

COVER LETTER

	Registration Se Division of Cor					
Raney Holdings Groveland, LLC						
SUBJECT: Name of Limited Liability Company						
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please ret	um all correspo	ndence concerning this matter	to the following:			
		Sarah E. Uhrik				
			Name of Person			
		McLin Burnsed		I		
		·	Firm/Company			
		1028 Lake Sumter Landing	3			
			Address			
		The Villages, FL 32162				
			City/State and Zip Code			
		SarahU@mclinbumscd.com				
		•	to be used for future annual report no	tification)		
For furthe	er information c	oncerning this matter, please c	ali:			
Sarah E.	Uhrik		352 259-5011			
Name of Person		at ()	ne Telephone Number			
Enclosed	is a check for th	ne following amount:				
■ \$25.0	00 Filling Fee	S30.00 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		Street Address: Registration S	ection			
Division of Corporations		Division of Corporations				
P.O. Box 6327 Tallahassec, FL 32314				The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Raney Holdings Groveland, LLC					
(Name of the Limited	Linbility Compa Florida Limited L	ny as it now appe: _iability Company)	ers on our records.)		
The Articles of Organization for this Limited Liab Florida document number L13000157114	oility Company	were filed on N	Tovember 7, 2013	and assigned	
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liab	ility company l	nere:		
N/A					
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the	designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applical	ble:	N/A			_
Principal office address MUST BE A STREET	ADDRESS)			>5 8	_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u>)	N/A		HASSEN FIO	
B. If amending the registered agent and/or re agent and/or the new registered office address	gistered office here:	address on our	records, <u>enter the na</u>	த்தி , ப ame of the new regi	stere
Name of New Registered Agent:	Sarah E. Uhrik, Esq.				
New Registered Office Address:	1028 Lake Sun		 		
•		Enter F	lorida street address		
	The Villages		, Florida	32162	
		City		Zip Code	

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

_ 🗆 Remove

_____ 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:

MGR = Manager AMBR = Authorized Member					
<u>Title</u>	Name	Address	Type of Action		
			□Add		
			□Remove		
			□Change		
	·		□Add		
			□ Remove		
			☐ Change		
		· 	□Add		
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