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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MACFARLANE FERGUSON & MCMULLEN

Account Number : 076077001654 Phone : (813)273-4229 Fax Number : (813)273-4396

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

Email Address:

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HeREP 1 1 2019

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cheyenne Associates, LLC	
(Name of the Limited Liability Company as if (A Florida Limited Liability	t now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were	filed on and assigned
Florida document number L19000192776	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Con	npany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
· · ·	201
Enter new mailing address, if applicable:	\(\sigma\)
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	address on our records, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
· · · ·	, Florida, Florida

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>	Name	Address	Type of Action
MMGR	Turtle Southeast Holdings, LLC	3401 W. Cypress Street	
		Suite 204	
			☐ Remove
		Tampa, Florida 33607	
•		• •	Change
	Greg Cecil	13521 Ponce De Leon Blvd	Ci Change
P	Стев Сесп	13321 Folice De Leoli Bivil	
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		Brooksville, Florida 34601	
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	David Ando	13521 Ponce De Leon Blvd	- T
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S	Scott Long	1352i Ponce De Leon Blvd	
		Brooksville, Florida 34601	
			Remove
			Change
•	Chris Thomley	13521 Ponce De Leon Blvd	
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		Brooksville, Florida 34601	Adu
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fective date, if other than the dan effective date is listed, the date must be ote: If the date inserted in this blockeument's effective date on the Department.	e specific and cannot be prior k does not meet the applic	able statutory filing re	(optional) than 90 days after filing quirements, this date) Pursuant to 605,026
record specifies a delayed of The 90th day after the recor	iffective date, but no d is filed.	t an effective tim	e, at 12:01 a.m.	on the earlier o
	2019			
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