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(Requ	estor's Name)	
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(City/S	State/Zip/Phone	= #)
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SECRETARY OF STATE
TALLAHASSIF FINER

Y SULKER MAY 1 8 2020

COVER LETTER

TO: Registration S Division of Co						
GOLF CA	AR MANAGEMENT, LLC					
30BJEC1.	Name of Lin	nited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	BART HOUSTON					
		Name of Person	<u></u>			
	THE HOUSON FIRM, PA					
		Firm/Company				
	1301 E BROWARD BLV	D., SUITRE 100				
		Address				
	FT. LAUDERDALE, FL 3	33301				
	BHOUSTON@THLGLAW	City/State and Zip Code				
		to be used for future annual report not	ification)			
For further information	concerning this matter, please c	·	,			
DEBBIE SCHENA		954 900-2615				
Name	of Person	at () Area Code Daytin	ne Telephone Number			
Enclosed is a check for t	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 Addre		Street Address:	action			
Registration Section Division of Corporations		Registration Se Division of Co				
P.O. Box 633		The Centre of	Tallahassee			
Tallahassee,	rl 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOLF CAR MANAGEMENT, LLC	
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.) y)
The Articles of Organization for this Limited Liability Company were filed on Florida document number L20000088757	3/24/2020 and assigned
This amendment is submitted to amend the following:	and ment is submitted to amend the following: tending name, enter the new name of the limited liability company here: ame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." The principal offices address, if applicable: and office address MUST BE A STREET ADDRESS) The principal address, if applicable: address MAY BE A POST OFFICE BOX)
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," th	e designation "Lt.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ARE NATIONAL SERVICES
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	r records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	lorida street address , 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.

City

Zip Code

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>	Address	Type of Action
MGR	BART A. HOUSTON	1301 E BROWARD BLVD, SUITE 100	□Add
		FT. LAUDERDALE, FL 33301	■Remove
			□Change
			□Add
			□ Remove
			□Change
			🗆 Add
			□Remove
			Change
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ffective date, if ot an effective date is list lote: If the date inso ocument's effective	ed, the date must be s crted in this block o	pecific and can loes not meet	the applicable	ate of filing or more statutory filing	re than 90 days afte	ional) or filing.) Pursuant to is date will not be	605.020 listed a
record specifies a de lis filed.	layed effective dat	e, but not an ε	effective time,	at 12:01 a.m. oi	n the earlier of: (b) The 90th day	after the
MAY 8			020				
	/	′ / 1					
		7					
	Sign	ature of a mem	ber or authorize	d representative o	f a member		

Filing Fee: \$25.00