L23000376251

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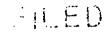
COVER LETTER

	gistration Sec vision of Corp			
CUDIFÆT.	18 South, L	LC ·		
SUBJECT:		Name of Limi	ited Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please returi	all correspon	ndence concerning this matter	to the following:	
		Mark A Dodge		
			Name of Person	
		18 South, LLC		
			Firm/Company	
		11806 SW 61ST PLACE F	ROAD	
			Address	
		Ocala, FL 34481		
			City/State and Zip Code	
		marktotalsite@gmail.com		
		E-mail address: ()	to be used for future annual report noti	fication)
For further i	nformation co	oncerning this matter, please ca	all:	
Mark Dodg	e		352 229-5388 at (
	Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is	a check for th	e 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



18 South, LLC

2823 90T 30 PM 12 57

(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
The Articles of Organization for this Limited Liability Compa Florida document number 1.23000376251	my were filed on 8/10/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	iability 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)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
(maning address MAT BEAT OST OTTICE BONY		
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	a
	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kriston Zlotecki	3001 SE Lake Wier Ave, Ocala, Fl. 34471	= Add
			□Remove
			☐ Change
MGR	Arron Edwin	733 E Fort King St. Ocala, FL 34471	\exists Add
			□Remove
			□Change
			□Add
			□ Remove
	•		☐ Change
			□Add
			□Remove
			□Change
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f an effective Note: If the	ate, if other than the contact date is listed, the date must be date inserted in this blockeffective date on the Department.	be specific an ck does not	d cannot be pri- meet the appl	or to date of fil icable statute	ing or more tha		filing.) Pursuant	
e record spe d is filed.	cifies a delayed effective	date, but no	t an effective	time, at 12:0	1 a.m. on the	earlier of: (b)	The 90th da	y after the
Octo	ober 20		2023					
		.19	rj (_			
	<u> </u>	ignature of a	member or au	horized repres	sentative of a n	iember		
	Mark A. Dodge MGR							