(((H240003010053)))



H240003010053ABCP

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Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROSSWAY SWAN TIERNEY BARRY LACEY & OLIVER, P.L.

Account Number : 120050000159 : (772)231-4449 Phone Fax Number : (772)231-4430

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

EMPLLC AMND/RESTATE/CORRECT OR M/MG RESIGN MISSILEVIEW MOBILE COURT, L.L.C.

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K. SALY

COVER LETTER

TO: Registration S Division of Co			(((H24000301005 3))		
Missilevic	ew Mobile Court, L.L.C.				
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles o	f Amendment and fec(s) are sub	emitted for filing.			
Please return all corresp	condence concerning this matter	to the following:			
	Danny R. Aton				
		Name of Person			
		Firm/Company	·		
	417 Indian River Avenue				
	Titusville, FL 32796	Address			
		City/State and Zip Code			
B 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(to be used for future annual report not	ification)		
Danny R. Alon	concerning this matter, please of	321 289-3509			
	of Person	at ()	ne Telephone Number		
Enclosed is a check for	the following amount:				
■ \$25.00 Filing 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)		
<u>Mailing Addi</u> Registration	Section	Street Address: Registration Se			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H24000301005 3)))

	OI	7	ê, K		
Missileview Mobile Court, L.L.C.					
(Name of the Limiter	Liability Compan Florida Limited Li	v as if now appears on our re ability Company)	cords.)		
The Articles of Organization for this Limited Lia Florida document number 1.0400060415					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of t	the limited liabil	ity company here:			
The new name must be distinguishable and contain the worlden new principal offices address, if applical (Principal office address MUST BE A STREET	ble:	y Company," the designation "	LLC" or the abbreviation "L.L.C."		
Enter new mailing address, if applicable:		417 Indian River Avenue			
(Mailing address MAY BE A POST OFFICE BOX)		Titusville, FL 32796			
B. If amending the registered agent and/or repagent and/or the new registered office address		idress on our records, <u>en</u>	fer the name of the new registered		
Name of New Registered Agent:	Danny R. Aton				
New Registered Office Address: 417 Indian River Avenue					
		Enter Florida street au	dress		
	Titusville	City	, Florida 32796		
		City	∠p ∪ oae		

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.

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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 (((H24000301005 3)))

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR I	Debra A. Wilms	6811 Windover Way	□Add
		Titusville, FL 32780	■Remove
			Change
AMBR I	Debra A. Wilms	6811 Windover Way	□Add
		Titusville, FL 32780	Remove
			Change
MGR Danny R. Aton	Danny R. Aton	417 Indian River Avenue	CAdd
		Titusville, FL 32796	ERemove
			■Change
			□Add
			CRemove
	-		DAddy CO
			☐ Change
			□Add
			ZRemove
			☐Change (((H24000301005 3)))

(((H24000301005 3))) D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) (optional) E. Effective date, if other than the date of filing: ___ (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 Xb) 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 August 2024 ignature by a member of authorized representative of a member

Filing Fee: \$25.00

Typed or printed name of signee

Danny R. Aton, Manager and sole Member