Division of Corporations Electronic Filing Cover Sheet

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(((H21000448099 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : USACORP INC. Account Number : I20130000019 Phone : (718)362-4789 Fax Number : (718)408-2550

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

Email Address: mreichman@readprop.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FL RANCH LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu Corporate Filing Menu

Help

12/08/2021 15:56

17184082550

From: 17184082550 To: 18506176383

(((H21000448099.3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FL RANCH LLC				
(<u>Name of the Limi</u>	ted Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)		
ne Articles of Organization for this Limited L	.iability Company were filed on _	11/22/2004	and	l assigned
orida document number 1.04000084683				
nis amendment is submitted to amend the foli	owing:			
If amending name, enter the new name of	f the limited liability company	<u>here</u> :		
e new name must be distinguishable and contain the	words "Limited Liabitity Company," th	e designation "LLC" or the	abbreviation	n "L.L.C."
ter new principal offices address, if appli	cable:			
rincipal office address MUST BE A STREE	ET ADDRESS)			<u>.,</u>
	<u> </u>			
nter new mailing address, if applicable:				
<u>lailing address MAY BE A POST OFFICE</u>	<u>BOX)</u>			
		·		
If amending the registered agent and	/or registered office address	on our records, ente	r the na	me of the
gistered agent and/or the new registered o	ffice address here:	185		9R91
	t mid Manual			굨
Name of New Registered Agent:	Levi Vogel	<u></u>	35 CO CO	, =
New Registered Office Address:	9507 NW 38th Street	-1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -	F***	L1.3
		Florida street address, Florida	11 () 11 () 12 ()	70 C
	Coral Springs	, Florida <u>-</u>	<u> </u>	 Ma
	CIIŷ		>	ال ن

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.

/s/ Levi Vogel	
If Changing Registered Agent, Signature of New Registered Agent	

0 From: 17184082550 To: 18506176383

(((H21000448099 3)))

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
			□ Remove
			Change
			□ Remove
			Change
			☐ Remove
			Change
			D Add
			□ Remove
			□ Change

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D. Hamonding any of	har information of	anton changed a) horas (Attach additional charte it noweever)	
D. If amenuing any or	ner mnormation, t	enter change(s) nere. (Autach daartomat sheets, y nevessary.)	
D. If afficienting any of	ner miormation, c	enter change(s) here: (Attach additional sheets, if necessary.)	
D. If amending any of	ner miormation, c	anter change(s) here. (Anach daanama sheets, y necessary.)	
	ner miormation, c	enter change(s) here. (Anach daanama sheets, ty necessary.)	<u>_</u>
——————————————————————————————————————	ner miormation.	enter change(s) here. (Anach daanama sheets, ty necessary.)	.

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	December 8	2021	#3≥0	2021	
		/s/ Robert Wolf	# T	21 DE	
	Robert Wolf	Signature of a member or authorized representative of a member	ASSEE.	18-3	FILED
		Typed or printed name of signee	LORIBA	1:35	O

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Filing Fee: \$25.00