## LU6000083022

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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## **COVER LETTER**

Tallahassee, FL 32314

TO: Registration S Division of Co				4
Cherry Ga	p. LLC	•		
SUBJECT:	Name of Lin	nited Liability Company	<del></del> ·	•
Maria de la compania	S A 15 ( ) 1			
	Amendment and fee(s) are sub ondence concerning this matter	_		
r lease return air corresp	ondence concerning this matter	to the following.		
	Lindsay T. Parrett			
	·	Name of Person		
	Cherry Gap, LLC			
	-	Firm/Company		
	2400 E. Colonial Drive			
		Address		
	Suite 200			
		City/State and Zip Code		
	Orlando, FL 32803 E-mail address: (	to be used for future annual report notification	on)	\$ 1.55 255
For further information (	concerning this matter, please c	all:		21. C
Lindsay Parrett	•	407 421-3883		ج ج
Name o	of Person	at () Area Code Daytime Tele	ephone Number	·, <u>.</u>
Enclosed is a check for t	he fallowing amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.	
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Sta Certified Copy (additional copy is en	tus &
Mailing Addre		Street Address:		
Registration Division of C		Registration Section Division of Corpora		
P.O. Box 6327		The Centre of Talla		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cherry Gap, LLC		
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company with Florida document number <u>L06000083022</u> .	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "ELC" or the abbrevia	ation "L.L.C."
Enter new principal offices address, if applicable:		282
(Principal office address MUST BE A STREET ADDRESS)		~ == :
		92
Enter new mailing address, if applicable:		The E
(Mailing address MAY BE A POST OFFICE BOX)		<u>ੂੰ</u> ਨੂੰ -
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	idress on our records, enter the name of	the new registered
Hen Registered Office Address.	Enter Florida street address	
	City Zi	p Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	performance of my duties, and I am famil	iar with and

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>	<u>Name</u>	Address	Type of Action
MGR	Lucas L. Parrett	2400 E. Colonial Dr., Ste. 200, Orlando, FL 32803	XAdd
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			□Change
			□Add
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	ive date, if other than the date of filing: 4/27/2022 (optional)	
lf an efi <u>Note:</u>	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be nent's effective date on the Department of State's records.	
If an eff <u>Note:</u> docun	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be unit's effective date on the Department of State's records.  The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th date	be listed as

Filing Fee: \$25.00