L10000083417

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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COVER LETTER ·

TO: Registration S Division of Co			
	PERTY ENTERPRISES, LLC		
SUBJECT:	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:	
	WILLIAM C. WEBB		
		Name of Person	
		Firm/Company	
	P.O. BOX 15191		
		Address	
	PANAMA CITY, FL 3240	06	
	webbinvest@comcast.net	City/State and Zip Code	
	E-mail address: ((to be used for future annual report notification)	
For further information	concerning this matter, please c	all:	
WILLIAM C. WEBB		850 896-0273 at ()	
Name	of Person	Area Code Daytime Telephone Number	
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	€ <u>_</u>
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TWB PROPERTY ENTERPRISES, LLC	<u> </u>			
(Name of the Limited Liability (A Florida Li	Company as it now appears on imited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Cor Florida document number L10000083417	npany were filed on 08/09/2	2010	and assign	ned
	•			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	ed liability company here:			
The new name must be distinguishable and contain the words "Limite	d Liability Company," the design	nation "LLC" or the abb	reviation "L.L.0	C."
Enter new principal offices address, if applicable:				
(<u>Principal office address MUST BE A STREET ADDRE</u>	<u> </u>			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
			.	
B. If amending the registered agent and/or registered o	office address on our recor	ds enter the name	of the new i	registere
agent and/or the new registered office address here:	Tince address on our recor	us, enter the hance	or the new 1	egistere
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida s	treet address		
		, Florida	Zip Code	
	City			Œ
New Registered Agent's Signature, if changing Registered			2021	
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nplete performance of my nt as provided for in Chap	duties, and I am fa oter 605, F.S. Or, i	ımili de with . f this docum	and ent is
			⇔ ,	J
		- ,.	4	

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	THOMAS G. MCCOY		
			≅Remove
			□Change
MGR	Thomas G. McCoy as trustee of the	P.O. Box 27670, Panama City Beach. Florida 3241	⊟ Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
			🗖 Add
			Remove
			□Change
			SZ □Add
		· }	Remove
		× × × × × × × × × × × × × × × × × × ×	□Add
			□Remove
			□ Change

Adding Thomas G. McCoy as	trustee of the Thomas G.	McCoy Trust, dated No	vember 13, 2019,	as MGI	R.
	-				
					
			_		
<u> </u>			<u>.</u>		
					
					
	 				
					
tive date, if other than the	date of filings		(options	al)	
Pective date is listed, the date must	be specific and cannot be pri	ior to date of filing or more the	an 90 days after fili	ng.) Purs	uant to 605.
If the date inserted in this blo nent's effective date on the De	partment of State's record	ds.	unements, tins of		
					APR
rd specifies a delayed effective	date, but not an effective	time, at 12:01 a.m. on th	e earlier of: (b)	The 90t	hday after
iled.		//			> ;
January 22nd	2021	.7 /			Ö (
	- Color	Tills	,	•	5
	Signature of a member or au	that is a description of a	mamber		