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| (Re | questor's Name) | |
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| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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2/23/23 V·LM SECONDARY OF STATE

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|---|---|---|
| SUBJECT: Orange Arenue Le Name of Limi | 205burg LCC ited Liability Company | |
| The enclosed Articles of Amendment and fee(s) are sub- | mitted for filing. | |
| Please return all correspondence concerning this matter | to the following: | |
| Kare | Robertson my | <u> </u> |
| Orange A | renue Leesburg LLC | |
| 23404 Co | JAddress | |
| Groreland, F | 2 34036 City/State and Zip Code | |
| Kjorobertso E-mail address: (1 | ne who com to be used for future annual report notificati | ion) |
| For further information concerning this matter, please ca | ıll: | |
| Vaca Politika | 762 202.6 | 50(A) |
| Name of Person | at () Area Code Daytime Te | lephone Number |
| Enclosed is a check for the following amount: | | |
| ₹ \$25,00 Filing Fee & Certificate of Status | ☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| <u>Mailing Address:</u> Registration Section | Street Address: Registration Section | าก |

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Adams 1000 110

| (Name of the Limited Liability Co (A Florida Lin | ompany as it now appears on our records.) ited Liability Company) |
|--|---|
| | pany were filed on January 7, 2011 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited | liability company here: |
| Richmond Retreat, U.C. The new name must be distinguishable and contain the words "Limited I | 52 202 |
| The new name must be distinguishable and contain the words "Limited I | Liability Company," the designation "LLC" or the abbreviation "L.L.C" |
| Enter new principal offices address, if applicable: | |
| (Principal office address MUST BE A STREET ADDRES: | <u>S</u> |
| | |
| | |
| Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| B. If amending the registered agent and/or registered off agent and/or the new registered office address here: | fice address on our records, enter the name of the new registere |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |
| | |
| | , Florida City Zip Code |

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 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 13404 Counta Rd33 | Type of Action |
|--------------|----------------------|---------------------------|----------------|
| AMBR | William B. Robertson | Graveland, Fl 34736 | ET Add |
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| ective date, if | other than the date | of filing: | | (option | ıal) |
| reffective date is te: If the date i | listed, the date must be sp | ecitic and cannot be poses not meet the ap | plicable statutory fil | more than 90 days after fi | ling.) Pursuant to 605,020 late will not be listed as |
| ecord specifies a s filed. | delayed effective date | , but not an effective | ve time, at 12:01 a.n | i. on the earlier of: (b) | The 90th day after the |
| ed Deca | | <u>20</u> 2 | | | |
| | Cam fo | Robertson | authorized representati | naser | |
| | √2 i Rua | ture of a member or a | sutnorized representati | ve orce member | |