## L11000081044

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## **COVER LETTER**

TO:	Registration Sec Division of Corp			•			
SUBJ	ECT:	Flora-Bana Name of Lim	Management	LLC			
The er	The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:						
Please	return all correspon	ndence concerning this matter	to the following:				
		Can	nuon Priu Name of Person				
			Firm/Company				
		17401	Perdido Key D. Address	<u>nivc</u>			
		Pensa	Perdido Key D.  Address  A Lola FL 325  City/State and Zip Code  Of Hornhama. Com  To be used for future annual report noti	07			
		Cameran E-mail address: (	D Flora hame . Com	lication)			
For fu	orther information co	oncerning this matter, please e	all:				
-	Carriero,	n Priu	at ( <u><b>351</b></u> ) <u>509</u> Area Code Daytim	- 5423 e Telephone Number			
		ne following amount:					
<b>X</b> s:	25.00 Filing Fee	☐ \$30.00 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)			
	Mailing Addres Registration S		Street Address: Registration Se	ction			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Flora-Bama Ma	inggement_	LLC	
(Name of the Limited Liability Compa	ny as I now appears of liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL11000081044	were filed on	1/13/2011	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here	:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the desig	gnation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>		
(Principal office address MUST BE A STREET ADDRESS)			<del></del> .
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our reco	ords, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Fiorida	ı street address	
		, Florida	
	City		Zip Code
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.

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
AMBR	Joseph Gilchrist	17401 Perdido Key Drive	□Add
		17401 Perdido Key Drive Pensacola, FL 32505	Remove
			□Change
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			□Change
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Note: 1	we date, if other than the date of filing:
he record ord is file	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 ed.
Dated _	July 12 2022
	Signature of a member or authorized representative of a member
	Cameron Prile Typed or printed name of signee