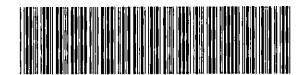
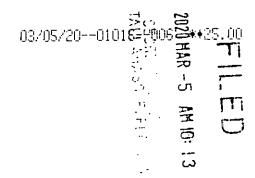
L110000095055

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer	
Office Use Only	



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COVER LETTER

TO:

TO: Registration Se Division of Cor			
	V Park LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Linda Marshall		
		Name of Person	
	Panacca R V Park LLC		
		Firm/Company	
	1089 Coastal Hwy		
	 	Address	
	Panacea, Fl 32346		
		City/State and Zip Code	
	1089coastalhwy@gmail.com	n to be used for future annual report notification)	_
For further information c	oncerning this matter, please c	•	
Linda Marshall		850 5090912 at ()	
Name o	f Person	Area Code Daytime Telephon	e Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Malling Addres Registration S		Street Address: Registration Section	
Registration Section Division of Corporations		Division of Corporation	
P.O. Box 632 Tallahassee, l		The Centre of Tallahass 2415 N. Monroe Street,	
		Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Panacea R V Park LLC				
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our rec Liability Company)	ords.)	
The Articles of Organization for this Limited 1	Liability Company	were filed on 08/18/2011	and assigne	ed
Florida document number L11000095055	 ·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	ility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "L	.LC" or the abbreviation "L.L.C.	."
Enter new principal offices address, if appli	çable:			
(Principal office address MUST BE A STREET ADDRESS)		1089 Coastal Hwy		
		Panacea, Fl 32346		
Enter new mailing address, if applicable:		Linda Marshall	2020 741.	
Mailing address MAY BE A POST OFFICE	BOX)	3108 Livingston RD	MAR.	77
		Tallahassee, Fl 32303	-5	
			A A	Γï
B. If amending the registered agent and/or		address on our records, <u>ent</u>	ter the name of the new re	gister
agent and/or the new registered office addr	ess here:		13 200	
Name of New Registered Agent:	Jason L. Seede	rs		
New Registered Office Address:	19 Deerview L	ane		
		Enter Florida street ada	lress	
	Havana		Florida 32333	
		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>	Name	Address	Type of Action
MGR	Linda N. Marshall	3108 Livingston Rd Tallahassee	\(\exists Add\)
			□ Remove
			□ Change
MGR	Dallas Marshall	1089 Coastal Hwy Panacea, Fl 32346	□Add
			≅ Remove
			□Change
		⊡Add	
			□Remove
			□Change
		□Add	
			□Remove
			□Add
			□Remove
		- 	□Change
			□Add
			Remove
			□ Change

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(If an ef	ive date, if other than the date of filing:(optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the self-ective date on the Department of State's records.
he recor	d 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 led.
Dated	<u>3-5-2020</u> ,
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00