L11000098837

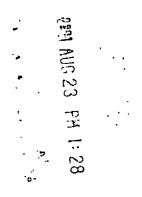
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>

Office Use Only



300371276253

08/23/21--01028--019 **25.00





Norm D. Fugate

Board Certified Attorney

Real Estate Law

City, County and Local Government Law

Woodroe Blake Fugate Associate Attorney

Norm D. Fugate, P.A.

A Law Firm

DATE: August 18, 2021

TO: Registration Section

Division of Corporations

SUBJECT: Fowler's Bluff River Camp. LLC

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

NORM D FUGATE PA Attn: Joanna Colvin Post Office Box 98 WILLISTON, FL 32696

For further information concerning this matter, please call:

Norm Fugate or Joanna Colvin at (352) 528-0019

Enclosed is check number 13998, made payable to Florida Secretary of State, for the following amount: \$25.00 Filing Fee

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fowler's Bluff River Camp, LLC

(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company Florida document number LF1000098837	were filed on August 29, 2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		-to
(Principal office address MUST BE A STREET ADDRESS)		
		ω
Enter new mailing address, if applicable:		PH
(Mailing address MAY BE A POST OFFICE BOX)		
		<u>ග</u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, enter the	name of the new registered
New Registered Office Address:		
En	Enter Florida street address	
	, Fiorid	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	C II,	2347 Com
I hereby accept the appointment as registered agent and agreen provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as placing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I provided for in Chapter 605, F.S	am familiar with and . Or, if this document is

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

Title	<u>Name</u>	Address	Type of Action
MGR	James R. Hudson, Jr.		□ Add
			□Remove
			—————————————————————————————————————
			□Add
			□Remove
			□Change
			□Add
			Remove
			☐ Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

and the sole Manager shall be James R. Hudson, Jr.,	
	_
<u> </u>	
	
	<u></u>
	Atta 23
	<u>~</u>
	<u> </u>
	_
tive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be prior to date of filing or more	e than 90 days after filing.) Pursuant to 605
: If the date inserted in this block does not meet the applicable statutory filing ment's effective date on the Department of State's records.	requirements, this date will not be list
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. or	s the earlier of: (b) The 90th day afte
filed.	The carrier of the 70th day and
August 13 , 2021	
Hugust 13 2021	
Jane Alla Mr. 5/1	
Signature of a member or authorized representative of	f'a member

Filing Fee: \$25.00