L11000134272

(Requestor's Name)	
(Address)	00033
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	077/03/13 ·
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

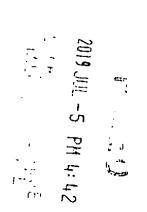
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Division of Co	rporations	·	· , · · · ·
	DE ADVENTURE PARK, LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Lesley Rhyne		
		Name of Person	
	Cunningham Miller PA		
	<u>.</u>	Firm/Company	
	2975 Overseas Highway		
	<u></u>	Address	-
	Maratho d ,FL 33050		
	lrhyne@floridakeyslaw.con	City/State and Zip Code	-
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
Lesley Rhyne		305 743-9428	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	the following amount:		
□ \$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 ADDRESS:

TO:

Registration Section

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

ARTICLES OF ORGANIZATION **OF**

2019 JUL -5 PM 4: 1:2

			111 4.45
OTHERSIDE ADVENTURE PARK, LLC		, *	* 4.* **
(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liab	is it now appears on our ility Company)	records.)	
The Articles of Organization for this Limited Liability Company we	re filed on November	29, 2011	and ass
florida document number L11000134272			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company here:		
The new name must be distinguishable and contain the words "Limited Liability (Somnany " the designation	on "LEC" or the	abbreviation "L.L.
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·		
Principal office address MUST BE A STREET ADDRESS)			
_			
Enter new mailing address, if applicable:			
•••	·		
Mailing address MAY BE A POST OFFICE BOX)			
-			
If amending the registered agent and/or registered office	e address on our r	ecords, <u>ente</u>	r the name o
egistered agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			

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 v provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documes being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person bein or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Ac
			☐ Remove
		-	□ Change
			Remove
			Change
			Add
		.	Remove
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ective date, if other than the dat	e of filing:		(optional)
effective date is listed, the date must be te: If the date inserted in this block	specific and cannot be prior t	to date of filing or more that	n 90 days after filing.) Pursuant te
ument's effective date on the Depar	tment of State's records.	ine statinory ming requi	nements, this date will not be
·			
record specifies a delayed ef	factiva data, but not	an offective time	at 17:01 a.m. on the e
he 90th day after the record		. an enective time,	at 12.01 a.m. on the ¢
,			
June 18	2019		
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Filing Fee: \$25.00