

8/19/24, 2:07 PM

Division of Corporations

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Jennifer L. Williamson, Esquire  
Account Name : CRARY, BUCHANAN, BOWDISH, ET AL  
Account Number : 878424881425  
Phone : (772)233-4582  
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DIVISION OF CORPORATIONS

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
II PARTNERS, LLC

Certificate of Status	0
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Corporate Filing Menu

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K. SALY

AUG 20 2024

FILED  
2024 AUG 19 AM 4:15  
TALLAHASSEE, FLORIDA

(((H2400027712 3)))

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

II Partners, LLC

\_\_\_\_\_  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**FILED**  
2024 AUG 19 AM 4:15  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/09/2012 and assigned  
Florida document number L12000034875.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

n/a

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

n/a

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

n/a

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

n/a

New Registered Office Address:

\_\_\_\_\_  
Enter Florida street address

\_\_\_\_\_  
City

\_\_\_\_\_, Florida

\_\_\_\_\_  
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

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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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Lori B. Williams	312 SW 2nd Street	<input type="checkbox"/> Add
		Okeechobee, FL 34974	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Marcel L. LaRose	2540 NE 60th Court	<input type="checkbox"/> Add
		Okeechobee, FL 34972	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Lori B. Williams	312 SW 2nd Street	<input checked="" type="checkbox"/> Add
		Okeechobee, FL 34974	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Marcel L. LaRose	2540 NE 60th Court	<input checked="" type="checkbox"/> Add
		Okeechobee, FL 34972	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Article IV of the Articles of Organization is hereby deleted and in lieu and place thereof, the following

Article IV is adopted:

"Article IV - Management: The Limited Liability Company will be manager-managed."

2024 AUG 19 AM 14:16  
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 TALLAHASSEE, FLORIDA

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective 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 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated August 15, 2024*Lori B. Williams*\_\_\_\_\_  
Signature of a member or authorized representative of a member

Lori B. Williams

\_\_\_\_\_  
Typed or printed name of signer

Filing Fee: \$25.00

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