## L12000097185

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## **COVER LETTER**

TO: Registration Se Division of Cor		ı	
Pisgah Rar SUBJECT:	nch, 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: Using the end	closed pre-paid UPS Overnight Envelop
,	Mike Baughman		
ż		Name of Person	
	Harding Construction Serv	rices, Inc.	
		Firm/Company	
	2509 Plantside Drive		
		Address	
	Louisville, Kentucky 4029	9	
	*	City/State and Zip Code	
	mbaughman@rmdcorp.con		<del> </del>
For further information of	e-mail address: i	to be used for future annual report notif	ication)
Michael E. Gregory	wheeling the matter pease c	502 639-1713	
		at ()	
Name (	if Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addres</u> Registration		Street Address: Registration Sec	tion
Division of C	Corporations	Division of Corp	porations
P.O. Box 632	' I	The Centre of T.	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pisgah Ranch, LLC	
( <u>Name of the Limited Liability Company as it n</u> (A Florida Limited Liability C	ow appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fil	led on July 27, 2012 and assigned
Florida document number L12000097185	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
Cold Spring Legacy, LLC	
he new name must be distinguishable and contain the words "Limited Liability Compa	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	5 20
	20 2 <u>2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 </u>
Inter new mailing address, if applicable:	26
Mailing address MAY BE A POST OFFICE BOX)	(1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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<del></del> -	ni N
3. If amending the registered agent and/or registered office address gent and/or the new registered office address here:	on our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida 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, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
-			
<u></u>			□Add
		* <del>***</del>	□Remove
			CO SChange
			Co Change  A Add  A Add  A Co Change  A Co Change  Co Change  Co Change
			☐ Change
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Effective o	date, if other e date is listed, t	than the da	te of filing	g:	prior to dat	e of filing o	ar more then	(opti	onal)	ennet to	<u> </u>
Note: If th	ne date inserted s effective date	l in this block	does not r	neet the ap	plicable:						
e record spord is filed.	ecifies a delaye	ed effective d	ate, but not	i an effecti	ve time, a	t 12:01 a.i	m. on the e	arlier of: (t	) The 90	th day a	ifter the
Dated	ugust 24		<u> </u>	202	<u>1</u>						
		100	12								
		Sig	mature of a	niember or	authorized	representat	tive of a mer	nber			

Typed or printed name of signee