## L13000033582

(Requestor's Name)  (Address)	
(Address)	80040
(City/State/Zip/Phone #)	
(Business Entity Name)	5 05/02/23
(Document Number)	
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## **Advanced Incorporating Service**

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: www.aisincfl.com

FGV Enterprise 1.C.C	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	OM VILLAS LLC	,	
(Name of the Limited)	Liability Company as it now appears Florida Limited Liability Company)	on our records.)	THE STATE
tA.	ronda Charled Capany Company)	1,5Te (	· Ste. FL
The Articles of Organization for this Limited Liabi	ility Company were filed on	03/15/2013	and assigned
Florida document numberL13000033582			·
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company her	<u>e</u> :	
EGV Enterprises, LLC			
The new name must be distinguishable and contain the word	s "Limited Liability Company," the des	ignation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	ADDRESS)		
		• :	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO			
	<del></del> -		<u></u>
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B. If amending the registered agent and/or regis	stered office address on our rec	ords, enter the <u>n</u> ar	ne of the new registere
agent and/or the new registered office address h	<u>ere</u> :	··	
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florid	la street address	
		P1 24.	
-	City	r torida	Zip Code
New Registered Agent's Signature, if changing Regi	istered Agent:		
I hereby accept the appointment as registered a provisions of all statutes relative to the proper a accept the obligations of my position as register	gent and agree to act in this ca and complete performance of m	y duties, and I am	familiar with and

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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ffective date, if other an effective date is listed, to the listed at the inserted ocument's effective date.	he date must be specific a I in this block does no	and cannot be prior to t meet the applicab	le statutory filing re	equirements, this d	ing.) Pursuant to 60:	5.020 ted a
record specifies a delayon is filed.	ed effective date, but n	ot an effective time	e, at 12:01 a.m. on t	he earlier of: (b)	The 90th day afte	er the
ated	May 1st	2023				
<u></u>		/s/: Elizabeth Vaugh				
	Signature of	_	ed representative of a	ı member	<u> </u>	

Filing Fee: \$25.00