L13000050526

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





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A. DUTLER // / JAN 2 6 2023

COVER LETTER

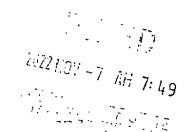
	vision of Co			
SUBJECT:	6789 SOU	THPOINT PARKWAY, LLC	:	
SOBJECT.		Name of Li	mited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are su	bmitted for filing.	
		ondence concerning this matte	_	
		John Papageorge		
			Name of Person	
			Firm/Company	
		1044 Strike the Gold Land	•	
			Address	
		Waxhaw, North Carolina	28173	
			City/State and Zip Code	
		john.jpproperties@gmail.co	oun (to be used for future snaus) report not	(Restion)
For further in	formation co	oncerning this matter, please o	-	
John Papageo			904 545-1146	
	Name of	Person	at (e Telephone Number
Enclosed is a	check for the	e following amount:		
≅ \$ 25.00 Fi	ling Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ing Address istration S		Street Address:	ation
_		ecuon orporations	Registration Sec Division of Cor	
	Box 6327	•	The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



6789 SOUTHPOINT PARKWAY, LLC

(Name of the Limited L

The Articles of Organization for this Limited Liability Company Florida document number L13000050526	were filed on 04/05/2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designatio	n "LLC" or the abbreviation "L.L.C."
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)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records,	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		, Florida
	City	Zip Code
Non-Declarated Apostle Cimpton, & should be Declarated Aposts.		

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, 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	John Papageorge	101 East Matthews Street, Suite 500	[]Add
		Matthews, NC 28105	=Remove
			□ Change
MGR	John S. Papageorge	101 East Matthews Street, Suite 500	≅Add
		Matthews, NC 28105	□Remove
			
····			
			□ Remove
			Change
			🗆 Add
			□ Remove
			☐ Change
			🗆 Add
			□ Remove
			Change
			□Add
			□ Remove
			Change

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_	
(If an effecti <u>Note:</u> If t	date, if other than the date of filing:
e record spord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
nu is incu.	
Dated	/ 11/3 , 2022
	/// // Signature of a member or authorized representative of a member
	John Papageorge
	Typed or printed name of signee

Filing Fee: \$25.00