L13000054767

((Requestor's Name)	
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PICK-UP	☐ WAIT	MAIL
	(Business Entity Name)	
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Certified Copies	_ Certificates of S	tatus
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Special Instructions to 1	Filing Officer:	
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TALLAHASSEE, FLORIDA

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2024 JUL 23 AM 9: 03

COVER LETTER

SUBJECT:		Name of Limi	ted Liability Company	
The enclosed A	articles of	Amendment and fee(s) are sub	nitted for filing.	
Please return al	ll correspo	ndence concerning this matter	to the following:	
		J. Ronald Tiller		
		100	Name of Person	
	Name of Limited Liability Company and Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: J. Ronald Titler			
		302 Live Oak Lane E		
			Address	
		Havana, FL 32333		
			•	
For further info	ormation c			notification)
Hannah Marsh	all			
	Name o	f Person	Area Code Day	rtime Telephone Number
Enclosed is a cl	heck for th	ne following amount:		
■ \$25.00 Fili	ing Fee		Certified Copy	Certificate of Status & Certified Copy
Regis	stration S	Section	Registration	Section
	sion of C Box 632			Corporations of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

UNIT 21 OAK HAVEN, LLC

2024 JUL 23 AM 9: 04

(A Florida Limi	ted Liability Company) IALLAH	IASSEE, FLORIDA	
Fhe Articles of Organization for this Limited Liability Comp Florida document number <u>L13000054767</u> .	any were filed on 04/12/2013	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	iability company here:		
Black Bear Hollow LLC			
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the abb	previation "L.L.C."	
Enter new principal offices address, if applicable:	302 Live Oak Lane East		
Principal office address MUST BE A STREET ADDRESS	Havana, Florida 32333		
Enter new mailing address, if applicable:	302 Live Oak Lane East		
Mailing address MAY BE A POST OFFICE BOX)	Havana, Florida 32333		
3. If amending the registered agent and/or registered off agent and/or the new registered office address here:		e of the new registe	
Name of New Registered Agent: M. Hannah	M. Hannah Marshall		
New Registered Office Address: 4268 Willia	ım James Way		
	Enter Florida street address		
Tallahassee	, Florida ³²³	903	
	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.

M. Hannah Marshall

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, 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
AMBR	Kelley T. Brewer	4268 William James Way	■Add
		Tallahassee, FL 32303	□Remove
			
			Change
			□Remove
			Change
			□Add
			Remove
			Change
			□Remove
			Change
			Remove
			Change

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e record specifies a delayed ef The 90th day after the record		not an effectiv	ve time, at 12:0:	l a.m. on	the ea	arlier d
ited July 11 J. Ronald Sign	2024					
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