L13000082908

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gum Slough Ranch, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tommy D. Permenter, Jr., Esq.

Name of Person

The Permenter Law Firm, P.A.

Firm/Company

2201 S.E. 30th Avenue, Suite 202

Address

Ocala, Florida 34471

City/State and Zip Code

tommy@permenterlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tommy D. Permenter, Jr., Esq.

352_{,622}-1811

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gum Slough Ranch, LLC		
(Name of the Limited Liabilit	y Company as it now appears on our Limited Liability Company)	records.)
(A Fiorida	Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on June 7, 20	on and assigned
Florida document number L13000082908		
	 -	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
Wekiva River Ranch, LLC		
The new name must be distinguishable and end with the wo	ords "Limited Liability Company," the o	lesignation "LLC" or the abbreviation
"L.L.C."		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		45
		A 22
	_	
B. If amending the registered agent and/or regis	stered office address on our reco	rds, enter the name of the new
registered agent and/or the new registered office ade		29 SSE SSE
		mo p
Name of New Registered Agent:		E S ₹ 11
N. B. '. 1005 A11		RAA : C
New Registered Office Address:	Enter Flori	da street address
	2.007	
	City	, Florida Zip Code
	Cuy	zip Coae

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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action Remove Remove Remove Add Remove Remove

. If amending any other	information, enter change(s) here: (Attach additional sheets, if necessary.)
1	
ated August 26	2013
Oll	
77//	Signature of a member or authorized representative of a member
46hh L. I	Fitzpatrick, Trustee, Managing Member
 	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

