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(Requestor's Name)
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(Document Number)
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APPROVED AND FILED



COVER LETTER

• 1

SUBJECT:	UPER RA	NCHITO #2, LLC		
Sobster		Name of Limi	ited Liability Company	
The enclosed A	articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return al	l correspo	ndence concerning this matter	to the following:	
		Steven Southwell		
			Name of Person	
		J. Steven Southwell, PA		
			Firm/Company	
		502 W. Main Street		
			Address	
		Wauchula, Florida 33873		
			City/State and Zip Code	
		E-mail address: (t	to be used for future annual report noti	fication)
For further info	rmation co	oncerning this matter, please ca	all:	
Steven Southw	rell		863 773-4449	
	Name of	Person		e Telephone Number
Enclosed is a cl	heck for th	e following amount:		
■ \$25.00 Filis	ng 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:

TO:

Registration Section
Division of Corporations

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

Super Ranchito #2, LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our recorda Limited Liability Company)	oras.)
he Articles of Organization for this Limited Liability	y Company were filed on 09/26/2013	and assigned
lorida document number L13000136314		
iorida document number	·	
his amendment is submitted to amend the following)* 	
a. If amending name, enter the new name of the l	imited liability company here:	
he new name must be distinguishable and contain the words "l	Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		- Tables 1
Principal office address MUST BE A STREET AD	DRESS)	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
Jump dudress MII BETT OST OTTICE BOTT		
3. If amending the registered agent and/or re	egistered office address on our reco	rds, enter the name of th
egistered agent and/or the new registered office a		- table - tabl
Name of New Registered Agent:	 	
New Registered Office Address:		
New Registered Office Address:	Enter Florida street add	lress .
New Registered Office Address:		ress Florida 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, enter the title, name, and address of each person being added or removed from our records:

. . .

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Mohamed Halim	1306 Citrus Street	
		Wauchula, Florida 33873	= Aud
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of	(optional)		
effective date is listed, the date must be specific and cannot be prior to date of the late inserted in this block does not meet the applicable state.				
ument's effective date on the Department of State's records.				
record specifies a delayed effective date, but not an ef	fective time, at 12:0	01 a.m. oi	n the e	earlie
he 90th day after the record is filed.				
ed Decenser 21, 2019.				
Signature of a member or authorized rep	presentative of a member			_

Page 3 of 3

Filing Fee: \$25.00