Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

Prom:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SI'Account Number : I20060000135

Phone : (305) 789-3200
Fax Number : (305) 799-4137

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: francisco@landmarkco.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WINDMILL FARMS GP, LLC

Certificate of Status	0
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Estimated Charge	\$55.00

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WINDMILL FARMS GP, LLC				~ 50
(Name of the Limited Liability (A Florida)	y Company : Limited Liab	is it now appearance into Company)	rs on our records.	12. Sign
The Articles of Organization for this Limited Liability Con Florida document number L13000145391				and assigned ANO:
This amendment is submitted to amend the following:				¥ 6.
A. If amending name, enter the new name of the limite	ed liability	company h	<u>ère</u> :	-
The new name must be distinguishable and contain the words "Limite	ed Liability C	Company," the c	lesignation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	ESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·				
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office addr	655 On Ou r Fl	ecords, <u>enter th</u>	name of the new registered
Name of New Registered Agent:				
New Registered Office Address:				
, — — — — — — — — — — — — — — — — — — —		Enter Flori	do street oddress	<u> </u>
			, Florid	la
New Registered Agent's Signature, if changing Registered A		City		Zip Code
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my postition as registered agen being filed to merely reflect a change in the registered of company has been notified in writing of this change.	d agree to plete perfe it as provi	ormance of i ded for in C	ny duties, and l	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 = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Francisco Rojo	3050 Biscayne Boulevard	≅ Add
		Suite 300	
		Miami, PL 33137	
MGR	Robert F. Saland	3050 Biscayne Boulevard	,
		Suite 300	
		Miami, FL 33137	_
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change
 -			GAdd
			□Remove
			☐ Clunge
			□Add
			— □ Кето че
			Change

ΑĪ	RTICLE V - Menagement	
Th	e Company shall be manager managed. The name and address of the current managers are: Francisco Rojo,	_
	50 Biscayne Blvd., Suite 300, Miami, FL 33137; and Robert F. Saland, 3050 Biscayne Blvd., Suite 300,	
	ami, FL 33137,	<u>-</u> -
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		2021
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ective of a sective of the section o	date, if other than the date of filing: e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 te date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list affective date on the Department of State's records.	5.0207 (ted as ti
cord spe is filed.	exifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	1 the
ed Sept	tember 28 2021	
_		
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00

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