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COVER LETTER

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

	ASS HOMESTEAD, LLC		_
30BJLC1	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
	Van P. Russell, Trustee		
		Name of Person	
	Van P. Russell Trust		
		Name of Limited Liability Company Int and fee(s) are submitted for filing. Incerning this matter to the following: Russell Trust Name of Person	
	121 Bay Ave		
		Address	
	Apalachicola, FL 32320		
	astrolabe@gtcom.net	City/State and Zip Code	
	E-mail address: (to	o be used for future annual report noti	fication)
For further information e	oncerning this matter, please ca	N:	
Van P. Russell, Trustee			
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addres Registration S			ction
Division of C		-	
P.O. Box 632			-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WIREGRASS HOMESTEAD, LL			3 ² . ~=	
(Name of the Limi	ted Liability Compa (A Florida Limited l	i <mark>ny as it now appear</mark> Liability Company)	rs on our records.)	
The Articles of Organization for this Limited I Florida document number	iability Company	were filed on $\frac{12i}{}$	2/09/2013 and assigned	: ,
This amendment is submitted to amend the fol	owing:		17.12 17.12 17.13 17.13	
A. If amending name, enter the new name of	of the limited liab	ility company he	ere:	
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the d	lesignation "L.L.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	·able·	Van P. Russell T	Frust	
(Principal office address MUST BE A STREI		121 Bay Ave		_
Committee war		Apalachicola, FL 32320		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Van P. Russell T	Frust	
		121 Bay Ave		
		Apalachicola, FL 32320		
B. If amending the registered agent and/or agent and/or the new registered office addressed agent: Name of New Registered Agent:	ss here:	address on our ro		<u>stered</u>
New Registered Office Address:	121 Bay Ave			
		Enter Flor	rida street address	
	Apalachicola		Florida	
		Ciţy	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>	Name	Address	Type of Action
MGR	Van P. Russell as Trustee	121 Bay Ave, Apalachicola, FL 32320	= Add
			□Remove
			□ Change
AMBR	Van P. Russell as Trustee	121 Bay Ave, Apalachicola, FL 32320	= Add
			□ Remove
			□ Change
MGR	Van P. Russell as Individual		□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change

	DF MEMBERSHIP INTEREST to VAN P. RUSSELL as Trustee of the Van P. Russell Trust	
DOCUMENT CO	PY ATTACHED	
		
		
 		_
fective date, if other	r than the date of filing: (optional)	
an effective date is listed, to the content of the date inserted i	the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to d in this block does not meet the applicable statutory filing requirements, this date will not be te on the Department of State's records.	
	sed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	
		~
record specifies a delay is filed. JULY 06 ated	2022	2822 J

Typed or printed name of signee

WIREGRASS HOMESTEAD, LLC

a Florida limited liability company

ASSIGNMENT OF MEMBERSHIP INTEREST

This ASSIGNMENT OF MEMBERSHIP INTEREST is made, executed, and delivered as of November 17, 2021 (hereinafter referred to as the "Effective Date"), by VAN P. RUSSELL, individually (the "Assignor") to and in favor of VAN P. RUSSELL, as Trustee of the VAN P. RUSSELL TRUST u/a/d November 17, 2021 (the "Assignee").

In consideration of \$10.00 and other good and valuable consideration, the receipt and sufficiency of which is acknowledged, the Assignor does hereby self, assign, transfer, and convey all of his membership interest in *WIREGRASS HOMESTEAD*, *LLC*, a Florida limited liability company, the same constituting **ALL** of the issued and outstanding membership interest in *WIREGRASS HOMESTEAD*, *LLC* (the "Interest"), to the Assignee. Assignor further assigns, transfers, and sets over all of his interests in any distributions and allocations attributable to such Interests.

Assignor warrants and represents that at the time of the assignment, Assignor has good and marketable title to the Interests, free and clear of all liens, claims, charges, encumbrances, leases, pledges, security interests, equities, covenants, and other restrictions of any nature whatsoever

EXECUTED this 17th day of November.

VAN P. RUSSELL

STATE OF FLORIDA COUNTY OF LEON

The foregoing instrument was acknowledged before me on November 17, 2021, by VAN P. RUSSELL.

Physical Presence ______
Remote Notarization _____
Personally Known _____
Produced Identification _____
Type of Identification _____

Notary Public--State of Florida

