# 14000035390

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#### **COVER LETTER**

**Division of Corporations** CROOM ROAD LAND HOLDINGS, LLC SUBJECT: 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: Carrie Christino Name of Person Soho Capital, LLC Firm/Company 701 S Howard Ave Ste 106-322 Address Tampa, FL 33606 City/State and Zip Code Carrie@soho-capital.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carrie Christino 813 557-4901 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & \$25.00 Filing Fee ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

CROOM ROAD LAND HOLD	NGS, LLC			
(Name of the Li	mited Liability Company as it n (A Florida Limited Liability C	now appears on our records.) Company)	<del></del>	
The Articles of Organization for this Limited	Liability Company were fil	led on 03/03/2014	and assigned	
Florida document number L14000035390	<del></del> -		_	
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limited liability con	upany here:		
The new name must be distinguishable and contain the	words "Limited Liability Compa	any," the designation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if appl	icable:			
(Principal office address MUST BE A STRE	EET ADDRESS)			
Enter new mailing address, if applicable:			2	
(Mailing address MAY BE A POST OFFICE BOX)		4 5		
		72		
		تن ري	5	
B. If amending the registered agent and registered agent and/or the new registered	d/or registered office add	iress on our records, enter a	e name of the nev	
	onice address here.			
Name of New Registered Agent:	David Koche	<u> </u>		
New Registered Office Address:	601 Bayshore Blvd Ste 7	00		
	Enter Florida street address			
	Татра	, Florida <sup>3360</sup>	6	
	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.

Changing Registered Agent, Signature of New Registered Agent

Page I of 3

# 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
AGENT	Charles Harper	100 N TAMPA ST Ste 2700 Tampa, FL 33602	Add
			■ Remove
			Change
AREP	Charles Harper	100 N TAMPA ST Ste 2700 Tampa, FL 33602	
			■ Remove
			Change
			Add
			Remove
			Change
		NO.	□ Add
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7 <b>66</b>	ora dista di akhamaha di kada di G	e.			
fan effe	ve date, if other than the date of ective date is listed, the date must be specified.	ning: ic and cannot be prior to dr	ate of filing or more than	(optional) 90 days after filing.) Pursuan	t to 605 0200
Note:	If the date inserted in this block does	not meet the applicable	statutory filing requi	ements, this date will not	be listed as
uocum	ent's effective date on the Departmen	t of State's records.			
ne rec	ord specifies a delayed effecti 90th day after the record is fi	ve date, but not ar led.	n effective time, a	at 12:01 a.m. on the	earlier o
	07/02/2010				
Dated	07/02/2019	<del></del> ,			
		of a member or authorized	can.	$\overline{}$	
		•			

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Typed or printed name of signee

Filing Fee: \$25.00