## 114000056305

(1	Requestor's Name)		
(Address)			
(Address)			
(1	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
	Business Entity Name)		
(Document Number)			
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## **COVER LETTER**

TO: Registration So Division of Coo						
Longitude	Holdings, LLC					
SUBJECT:Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	amitted for filing				
	ondence concerning this matter	-				
·	-					
	James Ondrejcak					
		Name of Person				
		Firm/Company				
	10121 Verona Lakes La	ne				
		Address	<del></del>			
	Miromar Lakes, FL 3391	13				
		City/State and Zip Code				
	james@sstn.com					
Can final an information of	E-mail address: ( concerning this matter, please c	to be used for future annual report n	otification)			
	oncerning this matter, prease c		_			
Melissa A. Register		216 835-8010 at ()				
Name o	f Person	at ()	time Telephone Number			
Enclosed is a check for the	he following amount:					
S25.00 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 Addres		Street Address:				
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 632	27	The Centre of	f Tallahassee			
Tallahassee, 1	FL 32314	2415 N. Mon	roe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF 2020 F.13 21 PH 12: 32

Longitude Holdings, LLC			•	
(Name of the Limi	ted Liability Comp: (A Florida Limited	iny as it now appears ( Liability Company)	on our records.)	<del></del>
The Articles of Organization for this Limited L Florida document number L14000056305	iability Company	were filed on 04/0	4/14	and assigned
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here	2:	
Longitude Holdings South, LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	ignation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		10121 Verona La	akes Lane	
		Miromar Lakes, FL 33913		
		4040414		
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		10121 Verona La		
		Miromar Lakes, I	-L 33913	
3. If amending the registered agent and/or in a sent and/or the new registered office addre		address on our rec	ords, <u>enter the t</u>	name of the new registe
Name of New Registered Agent:	James Ondrejcak			
New Registered Office Address:	10121 Verona	Lakes Lane		
		Enter Florida street address		
	Miromar Lake	s	, Florida	33913
		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.

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>	Address	Type of Action
MGR	TERESA ONDREJCAK	26 RIVER ROAD	□Add
		HINCKLEY, OH 44233	□Remove
			<b>≘</b> Change
MGR	JAMES ONDREJCAK	10121 VERONA LAKES LANE	<b>=</b> Add
		MIROMAR LAKES, FL 33913	□Remove
			□ Change
			□Add
			□Remove
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			Remove
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<del></del>			🗆 🗆 Add
			□Remove
			□ Change

n anthong any or	her information, enter c	mange(s) here. 1/2	nach adamonat speets,	y necessary.)	
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(If an effective date is liste Note: If the date inser	er than the date of filing d, the date must be specific and ted in this block does not n date on the Department of S	f cannot be prior to date neet the applicable s	of filing or more than 90 day	(optional) ss after filing.) Pursuant to 6 ts, this date will not be li	05.0207 (3 isted as th
he record specifies a del ord is filed.	ayed effective date, but not	an effective time, at	12:01 a.m. on the earlier	of: (b) The 90th day af	îer the
Dated February 11	Tall &	2020			
(	Signature of a :	nember or authorized (	representative of a member		
	James (	Typed or printed name	k e of signee		

Filing Fee: \$25.00