K14000058065

Office Use Only



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04/04/22--01010--015 **25.00

SECRETARY OF STATE TALLAHASSEE, FL

FILED
2022 APR -4 AH 6: 51

O SIMMONS APR 15 2022

COVER LETTER

TO:

Registration Section

Division	of Corporations				
SUBJECT: GI	RAND CLAY HOL	DINGS LLC			
SUBJECT:		mited Liability Company			
The enclosed Arti	cles of Amendment and fee(s) are su	bmitted for filing.			
Please return all c	orrespondence concerning this matte	r to the following:			
	Linda B.Trou	ine.			
	211144 5.1104	Name of Person			
	Grand Clav	Holdings LLC			
	Olding Oldy	Firm/Company	·		
	P.O. Box 176	35			
	1.01.00	Address			
	Lakeland, F	Tl. 33802-1765			
		City/State and Zip Code			
	Itroupe33802	O /			
		(to be used for future annual report notifi	cation)		
For further inform	ation concerning this matter, please	call:			
Linda B. Troupe		at (863) 665-2084			
	Name of Person	Area Code Daytime	Telephone Number		
Enclosed is a chec	k for the following amount:				
☐ \$25.00 Filing	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Division P.O. Bo	ntion Section n of Corporations	Street Address: Registration Sectorial Division of Corporate Centre of Ta 2415 N. Monroe Tallahassee, FL.	orations Illahassee Street, Suite 810		

ARTICLES OF AMENDMENT TO

FILED

ARTICLES OF ORGANIZATION **OF**

2022 APR -4 AM 6: 51

GRAND CLAY HOLDINGS LLC

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 04/09/14	and assigned	
Florida document number L14000058065			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or th	ne abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2060 Country Aire Loop)	
(Principal office address MUST BE A STREET ADDRESS)	if applicable: STREET ADDRESS) able: DEFICE BOX) and/or registered office address on our records, enter the name of the new registered		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, <u>enter the r</u>	name of the new registered	
New Registered Office Address.	Enter Florida street address		
	, Florida City Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I do provided for in Chapter 605, F.S.	im familiar with and Or, if this document is	

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
			□Remove
			🗆 Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			Change
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ective date, if other than the of effective date is listed, the date must be: If the date inserted in this blo ument's effective date on the De	be specific and ck does not m	cannot be prior the the cannot be prior to				ig.) Pursuant to 6	
cord specifies a delayed effective s filed.	date, but not	an effective tir	ne, at 12:01 a	.m. on the ear	lier of: (b)	Γhe 90th day at	fter the
ed March 25	,	2022	<u></u> .				
	11.	^					
	Linds	nember or autho	upe.				