## 14000144607

(Req	uestor's Name)	
(Addi	ress)	
(Addı	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer:	
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## **COVER LETTER**

TO: Registration Sec Division of Corp			
Lake Worth	Aviation LLC		,
SODSECT.	Name of Lim	ited Liability Company	
	amendment and fee(s) are sub	<del>-</del>	
	Daniel G. Hayes		
	•	Name of Person	
	Two Roads Development	LLC	
	<del></del>	Firm/Company	
	1217 S Flagler Drive, Suit	te 200	
		Address	<del></del>
	West Palm Beach, Florida	33401	
		City/State and Zip Code	<u> </u>
	dhayes@tworoadsre.com		
For further information co	E-mail address: ( ncerning this matter, please co	to be used for future annual report notified.	fication)
Daniel G. Hayes	<i>5</i> / <b>1</b>	561 693-6686	
Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
3.7.19° i 3.3		G	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
APRIL AM 9:15

Lake Worth Aviation 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	n for this Limited Liability Company	were filed on _	September 16, 2014	and assigned
Florida document number _	L14000144607			
This amendment is submitte	ed to amend the following:		·	
A. If amending name, ent	er the new name of the limited liab	ility company	<u>here</u> :	
Lake Worth Partners LLC				
The new name must be distinguis	hable and contain the words "Limited Liabi	lity Company," the	e designation "LLC" or the ab	breviation "L.L.C."
Enter new principal office	s address, if applicable:		<del></del>	
(Principal office address M	UST BE A STREET ADDRESS)	<del></del>		
Enter new mailing address	s, if applicable:			
(Mailing address MAY BE	A POST OFFICE BOX)			
				<del></del>
D. If amonding the registe	red agent and/or registered office			64h
agent and/or the new registe		address on our	records, enter the nam	e of the new registered
Name of New Reg	istered Agent:			
New Registered O	ffine Address:			
Now You distance of	Man I Indiana.	Enter F	lorida street address	
			, Florida	
		City	<u> </u>	Zip Code
New Registered Agent's Sign	nature, if changing Registered Agent:	<u>!</u>		

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 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
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		<del></del>	□Remove
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		rmation, enter change(s) here: (Attach additional sheets, if necessary.)
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an effect Note: If	tive date is listed, the date the date inserted in thi	the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 is block does not meet the applicable statutory filing requirements, this date will not be listed to Department of State's records.
record s	specifies a delayed effe l.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	April 5	2022
	•••	le de
		Signature of a member or authorized representative of a member
	posta o n	
	Daniel G. Hayes, Ma	anager

. .

Filing Fee: \$25.00