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(Address)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 MAY -2 PM 5:54

FILED

05/02/22--01043--011 ♦♦55.00

JUN 22 2022

S. PRATHER

**Date: 4/29/2022**

**TO: Fl. Dept of State**

**Re: Name change of "Tiger Swamp Ranch LLC" to "14 Points Huntin' Camp LLC"**

**Contact Person:**

**Denise Oliveri**

**Auth Member/Registered Agent**

**727 776 2561**

**See attached Application for Articles of Amendment to Articles of Organization.**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tiger Swamp Ranch LLC  
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:

Denise M. Oliveri  
Name of Person  
—  
Firm/Company  
PO Box 514  
Address  
Ozona, FL 34660  
City/State and Zip Code  
dmoliveri14@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denise M. Oliveri at (727) 776-2561  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 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 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

Tiger Swamp Ranch LLC

FILED  
2022 MAY -2 PM 5:55  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA  
and assigned

14 Points Huntin' Camp LLC

N/A

N/A

N/A

\_\_\_\_\_, **Florida** \_\_\_\_\_  
City Zip Code

N/A

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> | <u>Address</u> | <u>Type of Action</u>           |
|--------------|-------------|----------------|---------------------------------|
|              |             |                | <input type="checkbox"/> Add    |
|              |             |                | <input type="checkbox"/> Remove |
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|              |             |                | <input type="checkbox"/> Change |

N/A

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: 05/01/2022 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated April 29, 2022.

Denise M. Oliveri

Signature of a member or authorized representative of a member

Denise M. Oliveri

Typed or printed name of signee

FILED  
2022 MAY -2 PM 5:55  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE