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JUN 2 2 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 Se Division of Cor			
SUBJECT: Tig	er Swamp R	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	bmitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Denise	M. Oliveri Name of Person	
		-	
		Firm/Company	<del> </del>
	PO Box	514	
		Address	
	Ozona Fl	34660 City/State and Zip Code	
	dmolived	i 14 2 gmail. Coe (to be used for future annual report noti	<b>M</b>
For further information of	e-mail address: (	(to be used for future annual report not)	fication)
	•		·
Denise M	L. Dliveri	at (727) 776	
Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	e 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

O	)F	
Tiger Swamp Ran		AY -2 PI
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our recor Liability Company)	ds.) The production
The Articles of Organization for this Limited Liability Company	were filed on Jan 20	A015 and assigned
Florida document number <u>L1500010975</u>		,p
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
14 Points Huntin' Camp	LLC	,
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	N/A	
	•	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	N/A	<del></del>
Maning address MAI DE A I OUI OFFICE BOX		
B. If amending the registered agent and/or registered office a	address on our records, ente	r the name of the new registered
agent and/or the new registered office address here:	, <del></del>	
Name of New Registered Agent:		
New Registered Office Address:	N/+(	
New Registered Office Address.	Enter Florida street addre	255
	<b>T</b>	lorido
<del></del>	City .	lorida Zip Code
Now Designand Agent's Signature if shanging Designand Agent.		

## 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 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
			☐ Change
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ective date, if other than the date of filing: 05/01/2022 (on	
n effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days af	ter filing.) Pursuant to 605.020
te: If the date inserted in this block does not meet the applicable statutory filing requirements, to tument's effective date on the Department of State's records.	his date will not be listed as
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: s filed.	(b) The 90th day after the
0 7.20	
ed hord 29, 2022.	2 TĂĹ
Leavise M. Ofrano	2022 MAY -2 ALLAHASSEE
Signature of a member or authorized representative of a member	AY 1
•	M-< /, -
Denise M. Oliveri Typed or printed name of signee	Y-2 PM