L15000144669

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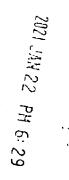
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MAR 0 5 2021 S. YOUNG



COVER LETTER

SUBJECT: Conch Cay Group 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: Margaret Dadchan Name of Person Canch Cay Group LLC Firm/Company Address Merritt Island FL 32952 City/State and Zip Code Lodchant Caol. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Margaret Badchan Name of Person at (321 149 - 821e2 Daytime Telephone Number		tion Section of Corporations
Please return all correspondence concerning this matter to the following: Margaret Body Chan Name of Person Canch Cay Group LLC Firm/Company 2290 Jason Street Address Merrit Island FL 32952 City/State and Zip Code body Chan He and I com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Margaret Body Chan Name of Person at (321 749 - 8262 Daytime Telephone Number) Enclosed is a check for the following amount:	SUBJECT:	Conche Cay Group LLC Name of Limited Liability Company
Margaret Bodichon Name of Person Canch Cay Group LLC Firm/Company 2290 Jason Street Address Merritt Island FL 32952 City/State and Zip Code bodichon Headl. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Margaret Bodichon at (321, 749-821e2 Daytime Telephone Number Enclosed is a check for the following amount:	The enclosed Arti	cles of Amendment and fee(s) are submitted for filing.
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E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Margaret Bod Chon at (321) 749-82 le 2 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount:		2290 Jason Street
Margaret Bodchon at (321) 749-82 le 2 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount:		
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount:	For further inform	ation concerning this matter, please call:
	Margar	
Teach of File Park Control Park	Enclosed is a chec	k for the following amount:
ZS \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	 ★ \$ 25.00 Filing	Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy

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

Conch Cay Grou	p LLC	20
(Name of the Limited Lability Compar (A Florida Limited L	ny as it now appears on our record liability Company)	<u>ds.</u>) 22
The Articles of Organization for this Limited Liability Company. Florida document number <u>L15000144669</u> .	were filed on <u>Aug. 24</u>	2015 and assigned
This amendment is submitted to amend the following:		6; 2
A. If amending name, enter the new name of the limited liabi	lity company here:	9
Conch Cay Services LLC The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	40 S, An Key Largo	dros Road , FL 33037
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	40 S. And Key Largo	ros Road FL 33037
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	25
		orida
	City , F II	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>Address</u> **Type of Action** Title Name Nicole Bodchon 2290 Jason St. DAdd Merritt Island FL. 32952 TRemove _____ □Change Derek Borchon 40 S. Andros Road Key Largo, Fl 33037 DRemove ______ □Change 40 S. ANdros Road MAD AMBR Nicole Bodchon Key Largo FL. 33037 □Remove Change □Remove ______ □Change _____ □Add □ Remove __ □Change □Add □Remove

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(If an effe Note:	ve date, if other than the date of filing:	.07 (3 as th
ne record ord is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after thed.	ie
Dated _	January 18, 2021. Margaret Bodulus. Signature of a member or authorized representative of a member	
	Margaret to achorized representative of a member	
	Margaret Bodohon	