L16000102798

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(Address)
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(Business Entity Name)
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CORPORATE ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

		PICK U	P: <u>10/16/2019</u>
	хх	CERTIFIED COPY	
		РНОТОСОРУ	
		CUS	
	хx	FILING	AMENDMENT
1.		HIGH TIDE REAL ESTATION (CORPORATE NAME AND DOCUMENT)	E, LLC vt #)
2.		(CORPORATE NAME AND DOCUMEN	VT #)
3.		(CORPORATE NAME AND DOCUMEN	VT #)
4.		(CORPORATE NAME AND DOCUMEN	VT #)
5.		(CORPORATE NAME AND DOCUMEN	VT #)
6.		(CORPORATE NAME AND DOCUMEN	VT#)
	ECIA STRU	L ECTIONS:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

High Tide Real Estate, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company lorida document number 116000102798	were filed on 05/25/2016	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil		29
he new name must be distinguishable and contain the words "Limited Liabil .nter new principal offices address, if applicable:	ity Company." the designation "LLC" or the 200 Windward Dr.	e abbreviation L.L.O.S
Principal office address MUST BE A STREET ADDRESS)	Niceville, FL 32578	
		24 - 370a Frag 4
nter new mailing address, if applicable:	200 Windward Dr.	ξι ξο Σ ζΟ Δ. Δ.
Mailing address MAY BE A POST OFFICE BOX)	Niceville, FL 32578	-
S. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:		er the name of the
	Enter Florida street address	
	Florida	Zip Code
	CIIF	гар слош

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			Add
			□ Remove
		- <u></u>	Change
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ffective date	e, if other than	the date of fi	ling:			(optional)	
an effective da lote: If the d	te is listed, the date ate inserted in th	: must be specific is block does n	and cannot be properties approximately	rior to date of filing dicable statutory	or more than 90 day	s after filing.) Pursue is, this date will no	nt to 605,020 t be listed a
	fective date on th						
e record sr	necifies a del:	aved effective	e date but	nat an affacti	iva tima at 13	:01 a.m. on the	. ممانمہ ،
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00