## 116000125620

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## **COVER LETTER**

	Registration Se Division of Cor			
cup in a		' LAND RANCH II, LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	endence concerning this matter	to the following:	
		W. Scott Newbern		
			Name of Person	
		W. Scott Newbern, PL		
			Firm/Company	
		2982 Giverny Circle		
		<del> </del>	Address	
		Tallahassee, FL 32309		
			City/State and Zip Code	
		wsnewbern@msn.com		
		E-mail address: ()	to be used for future annual report not	ification)
For furth	er information c	oncerning this matter, please ca	all:	
W. Scott	Newbern		850 591-1707 at ( )	
	Name o	f Person		ne Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	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)

TO:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

SUL 10 AH 7:43

ETERNITY LAND RANCH II, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	y Company were filed on 06/30/2016	and assigned
Florida document number _L16000125620	·	
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	.imited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	<del></del>
	<del></del>	<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<del> </del>	
B. If amending the registered agent and/or re- registered agent and/or the new registered office a	•	enter the name of the nev
Name of New Registered Agent:		····
New Registered Office Address:	Enter Florida street address	
<del>-</del>	, Flori	ida 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>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	NICA RANCH, LLC	19520 168th Street	
		Live Oak, FL 32060	■ Remove
			Change
MGR	BOREAL RANCH, LLC	19520 168th Street	Add
		Live Oak, FL 32060	Remove
			Change
			Remove
			Add
			Change
<del></del>			
			□ Remove
		<del> </del>	Change
	···		
			Remove
			□ Change

	the state of the s
Effec	tive date, if other than the date of filing: (optional)
Note	ffective 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 605.020. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
docui	ment's effective date on the Department of State's records.
he re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
	e 90th day after the record is filed.
Th	
	Inly 10 1 1 1 N
	July 10 2018
	July 10 . 2018
The Dated	July 10  Signature of a member or authorized representative of a member

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Filing Fee: \$25.00