

L16 000185427

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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21 APR 23 AM 9:55

NOT FOR PUBLIC RELEASE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE RESERVE, 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:

ANDREW W. ROSIN

Name of Person

ANDREW W. ROSIN, PA

Firm/Company

1966 HILLVIEW STREET

Address

SARASOTA, FL 34239

City/State and Zip Code

AROSIN@ROSINLAWFIRM.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JESSICA SIMMONS

Name of Person

at (941)

Area Code

404-0239

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

21 APR 23 AM 9: 55

The RESERVE, 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 Company were filed on 10/05/2016 and assigned
Florida document number L16000185427.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City 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

21 APR 23 AM 9:55

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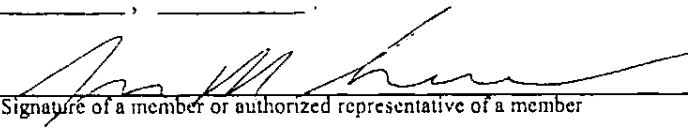
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

21 APR 23 AM 9:55

E. Effective date, if other than the date of filing: 04/20/2021 (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 20, 2021


Signature of a member or authorized representative of a member

JESSICA M. SIMMONS

Typed or printed name of signee

Filing Fee: \$25.00

Prepared by:
Law Office of Andrew W. Rosin, PA
Andrew W. Rosin, Esq.
1966 Hillview Street
Sarasota, FL 34239

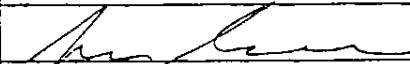
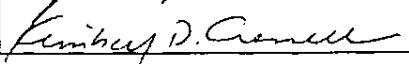
CERTIFICATE OF COMPANY RESOLUTION

We, JESSICA M. SIMMONS AND KIMBERLY D. CRESSELL, AUTHORIZED MEMBERS OF THE RESERVE, LLC, A FLORIDA LIMITED LIABILITY COMPANY (herein referred to as the "Company"), do hereby certify that by unanimous consent of the Shareholders and Directors of said Company, the following resolutions were duly moved, seconded and unanimously adopted:

RESOLVED:

That KIMBERLY D. CRESSELL shall be removed as AUTHORIZED MEMBER and JESSICA M. SIMMONS shall be and remain as the AUTHORIZED MEMBER.

WE FURTHER CERTIFY that the foregoing resolution remains in full force and effect, has not been rescinded or modified, conforms with the Articles of Incorporation and Company By-laws, and the undersigned Shareholders, Directors and Officers of the Company are empowered to act for and on behalf of the Company in any of its business.

NAME	TITLE	SIGNATURE
JESSICA M. SIMMONS	AUTHORIZED MEMBER	
KIMBERLY D. CRESSELL	AUTHORIZED MEMBER	

IN WITNESS WHEREOF, WE have hereunto set our hands as the Managing Members of the Company on ____ DAY OF APRIL, 2021, and certify that the above is true and correct.

THE RESERVE, LLC,
A FLORIDA LIMITED LIABILITY COMPANY

Witness Printed Name

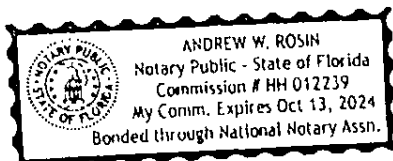
Witness Printed Name

JESSICA SIMMONS, AUTHORIZED MEMBER

KIM CRESSELL, AUTHORIZED MEMBER

STATE OF FLORIDA
COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this APRIL 19, 2021, by JESSICA SIMMONS AND KIM CRESSELL AS AUTHORIZED MEMBERS OF CRESSELL SIMMONS DEVELOPMENT GROUP, LLC, A FLORIDA LIMITED LIABILITY COMPANY, who ☒ is/are personally known to me or ☐ has/have produced a driver's license(s) as identification.



Notary Public

Print Name:

My Commission Expires:

(Seal)