## L17000045021

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	me)
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2020 JUN -5 FK 6: 52

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JUN 22 2020

## **COVER LETTER**

TO: Registration Se Division of Cor		<b>.</b>	
	Companies, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Thomas Harl		
		Name of Person	
	High Mark Companies, I	LLC	
		Firm/Company	······································
	1220 Winter Garden Vin	eland Rd, Suite 100	
		Address	
	Winter Garden, FL 3478	7	
	tom@highmarkgc.com	City/State and Zip Code	
	= -	to be used for future annual report notifi	ication)
For further information e	oncerning this matter, please c	all:	
Thomas Harl		407 749-6500	
Name o	of Person		Telephone Number
Enclosed is a check for the	he 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 9 Division of C P.O. Box 632	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Table 2415 N. Monroe	oorations
Tallahassee, FL 32314		Tallahassee, FL	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF 2020 JULY - 5 PH 6: 52

(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L17000045021</u> .	ny were filed on 02/27/2017 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	8730 Apache Trail	
(Principal office address MUST BE A STREET ADDRESS)	Kissimmee, FL 34747	
Para de la companya d	8730 Apache Trail	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Kissimmee, FL 34747	
,		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, enter the name of the new regis	
agent and/or the new registered office address here:		
Name of New Registered Agent:		
	Estar Elorido streat address	
Name of New Registered Agent:	Enter Florida street address, Florida City Zip Code	

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 = M $AMBR = A$	lanager .uthorized Member	2920 JUL -5 PH 6: 52	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
		8-13-14-14-1	□Change
			□Add
			□Remove
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			Changa

	inge(s) here: (Attach additional sheets, if necessary.)  2120 JU -5 Fil 6: 52
	, 110.25
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*	
	06/15/2020
fective date, if other than the date of filing:	(optional) annot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
an effective date is listed, the date must be specific and ca	annot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
	et the applicable statutory filing requirements, this date will not be listed as
ocument's effective date on the Department of Stat	te s records.
record specifies a delayed effective date, but not an	n effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
l is filed.	•
June 1st	2020
ated,	<del></del>
	• -
Signature of a me	ember or authorized representative of a member
Thomas Harl	
<del></del>	vied or printed name of signee

Filing Fee: \$25.00