

W17000236450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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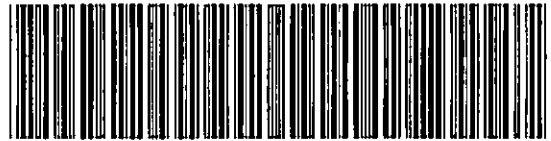
(Business Entity Name)

(Document Number)

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MAR 25 PM 4:48
TALLAHASSEE, FL

BRUCE
MAR 03 2022

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: High Horse Private Investments LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rhondalynn Tolbert
Name of Person

Firm/Company

4827 Macy Way
Address

Ellenwood, GA 30294
City/State and Zip Code

roncamkyron@yahoo.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Rhondalynn Tolbert at (850) 260-2684
Name of Person Area Code 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

RECEIVED
DIVISION OF CORPORATIONS
JAN 25 PM 4:48
2007

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

High Horse Private Investments 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 11/15/2017 and assigned
Florida document number L17000236450.

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)

381 Canterbury Circle NW
Fort Walton Beach, FL 32548

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4827 Mary Way
Ellenwood, GA 30294

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:

Rhondalynn Tolbert

New Registered Office Address:

381 Canterbury Circle NW

Enter Florida street address

Fort Walton Beach

City

Florida

32548

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.

Rhondalynn Tolbert

If Changing Registered Agent, Signature of New Registered Agent

2017 NOV 15 PM 4:48
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF WALTON
FLORIDA

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>	<u>Type of Action</u>
MGR	Kendall Brown	85 Spinnaker Lane	<input type="checkbox"/> Add
		Shalimar, FL 32579	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Rhondalynn Tolbert	48 381 Canterbury Circle NW	<input checked="" type="checkbox"/> Add
		Fort Walton Beach, FL 32548	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

DATE 02-25-2014 BY 60322

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[illegible]

02/02/2022

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.

Dated _____, _____

Shondalyn Powell
Signature of a member as of:

Signature of a member or authorized representative of a member

Rhondalynn Tolbert

Typed or printed name of signee

Filing Fee: \$25.00