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COVER LETTER

				、
SUBJECT:	Winter Barto	osch, LLC		
_		Name of Limi	ted Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return a	all correspon	dence concerning this matter t	to the following:	
		Joseph Bartosch		
	Winter Bartosch, LLC CT: Name of Limited Liability Company Plosed Articles of Amendment and fee(s) are submitted for filing. Plosed Articles of Amendment and fee(s) are submitted for filing. Plosed Articles of Amendment and fee(s) are submitted for filing. Joseph Bartosch			
Winter Bartosch, LLC Firm/Company 2150 Century Boulevard				
			Firm/Company	
		2150 Century Boulevard		
			Address	
		St. Augustine/Florida, 3208	34	
			City/State and Zip Code	
		-	o be used for future annual report notific	cation)
For further inf	formation co	ncerning this matter, please ca	ılı:	
Joseph Bartos	sch			
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$ 25.00 Fil	ling Fee		Certified Copy	Certificate of Status &

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**

Winter BArtosch, LLC			ļ			
(Name of the Limi	ited Liability Compa (A Florida Limited	nnv as it now appears on our records Liability Company)	5			
The Articles of Organization for this Limited L	Liability Company	were filed on November 17, 201	and assigned			
Florida document number L17000238535	·					
This amendment is submitted to amend the following	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company here:]			
Panthera Construction and Development, LLC			•			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."			
Enter new principal offices address, if applic	cable:	2150 Century Boulevard				
(Principal office address MUST BE A STREI	ET ADDRESS)	St. Augustine, Florida 32084				
			2			
			C.t.)			
Enter new mailing address, if applicable:		2150 Century Boulevard	']			
(Mailing address MAY BE A POST OFFICE	BOX)	St. Augustine, Florida 32084	C ·			
B. If amending the registered agent and	Vor registered o	ffice address on our records	enter the name of the ne			
registered agent and/or the new registered o	ffice address her	<u>e</u> :				
Name of New Registered Agent:	Robert Silverman					
New Registered Office Address:	220 N. Serenata Drive, Suite 634					
-		Enter Florida street address				
Ponte		Each . Flo	rida 32082			
		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

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 Title <u>Name</u> <u>Address</u> Type of Action ☐ Remove ☐ Change □ Add ☐ Remove _□ Change _□ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Remove ☐ Change □ Add □ Remove _□ Change

f amending any other information, enter change(s) here: (Attach additional sheets, if neces	
	
	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after file. If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	lines \ Damarana a. COS 030
e record specifies a delayed effective date, but not an effective time, at 12:01 a.r The 90th day after the record is filed.	m. on the earlier o
ated January 11, 2018.	- 65
	ê
Signature of a member or authorized representative of a member	; .:
	Ċ.;
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Filing Fee: \$25.00