L18000113599

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STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Big Pine Key Sinset Limited Liability Company 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:
Name of Person
516 Indian Cilac Road
Vero Beach FL 32963
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Ko. 4h Rocall 120 538 5491
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee \$\ \times \$30.00 Filing Fee & \ \times \$55.00 Filing Fee & \ \times \$60.00 Filing Fee, \ \times \$ \text{Certified Copy} \ \text{(additional copy is enclosed)} \end{additional copy is enclosed}
Mailing Address: Registration Section Division of Corporations Street Address: Registration Section Division of Corporations

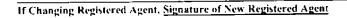
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records,) (A Florida Limited Liability Company)	<u>-</u>
The Articles of Organization for this Limited Liability Company were filed on 51718 Florida document number 418000113599.	and assigned
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 abb	previation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2013 HAR - SEC
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2 PHI2: 50
B. If amending the registered agent and/or registered office address on our records, enter the name agent and/or the new registered office address here:	e of the new registere
Name of New Registered Agent: New Registered Office Address: Enter Florida sweet address	
	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 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 Type of Action <u>Address</u> Title Name. Kerth Bregoff 516 Indian Clackd. Madd Vero Brach FL 32963 Remove ____ Change Dawn Bregott 516 Tridian Cilac Rd Mad Vero Beach, FL 32963 Remove □ Change $\square \Lambda dd$ □ Remove □Add Remove □ Change □Add _ □Remove

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lf an effective da Note: If the da	ate inserted in thi	: must be specific is block does no	and cannot be prion of meet the applic	r to date of filing or n cable statutory filir	(optionore than 90 days after requirements, this	r filing.) Pursuant (to 605.0207 be listed as
document's eff	fective date on th	ie Department (of State's records	:.			
e record specif rd is filed.	ies a delayed effe	ective date, but	not an effective t	.ime, at 12:01 a.m.	on the earlier of: (b	o) The 90th day	y after the
Dated F.C.	brasz	28	202	3/PM		SLAR TALI	2023 MAR
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		Signature o	f a member or aut	torized representativ	e of a member	American Electrical Section 1997	0
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Filing Fee: \$25.00