# L18000229673

(Re	equestor's Name)	
(Ac	ldress)	<u> </u>
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(Ci	ty/State/Zip/Phone	e #)
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# **COVER LETTER**

Registration Section Division of Corporations

TO:

Rambler (	Golf, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Phil Beechler, Paralegal		
		Name of Person	<del></del>
	Taylor English Duma LLF		
		Firm/Company	
	1600 Parkwood Cir SE, St	e 200	
		Address	
	Atlanta, GA 30339		
		City/State and Zip Code	
	pbeechler@taylorenglish.co	ווזי	
	E-mail address: (	to be used for future annual report noti	fication)
For further information	concerning this matter, please or	all:	
Phil Beechler		at () 336-7146 Area Code Daytim	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
S25.00 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)
Regi: Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURI Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2019 MAR - 6 PM 3: 19

Rambler Golf, LLC

( <u>Name of the Limited Liability Com</u> (A Florida Limite	ipany as it now appears on our records.) Ed Liability Company)	Will with SSEE STATE
The Articles of Organization for this Limited Liability Compared Florida document number L18000229673	ny were filed on September 27, 2018	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability 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 registered agent and/or the new registered office address h		enter the name of the new
Name of New Registered Agent:	<del> </del>	
New Registered Office Address:		
	Enter Florida street address	
	, Florid	daZip 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Rick Rapp		□ Add
		9593 Ginger Ct Parkland, FL 33076	■ Remove
			Change
MGR Lawrence A. Miller	Lawrence A. Miller	<del>-</del>	
		□ Remove	
		4800 N Federal HWY, Ste 302D Boca Raton, FL 33431	Change
			Add
		Remove	
		☐ Change	
		_	Add
		Remove	
	<del></del>	Change	
		<del></del>	□ Remove
			Change
			Add
			Remove
			Change

(If an et Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	7/28 : 2019
	Signature of a member or authorized representative of a member
	Lawrence A. Miller  Typed or printed name of signee

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Filing Fee: \$25.00