L18000248280

(Req	uestor's Name)	
bbA)	ress)	
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(City,	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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1. TO



To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 10/01/25 Order #: 4455484-1

Re: 110 Geneva Drive, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$60.00 - FL State Account Number: 12000000195

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:	Regi Divi:	stration Sec sion of Corp	ction porations			
CHD IE/		110 Geneva				
SUBJECT:Name of Limited Liability Company						
			amendment and fee(s) are sub	_		
Please re	eturn :	all correspon	dence concerning this matter	to the following:		
			S. Ann Wilson, Esq.			
				Name of Person		
			Wharton Law Group, PA			
				Firm/Company		
			456 S. Central Ave.			
				Address		
			Oviedo, FL 32765			
				City/State and Zip Code		·····
			ann@whartonlawgroup.com E-mail address: ft	to be used for future annual	report notification)	
For furth	er inf	formation co	ncerning this matter, please ca		,	
S. Ann V	Vilso	n		407 365	5-7193	
		Name of	Person	Area Code	Daytime Telepho	one Number
Enclosed	l is a	check for the	following amount:			
\$25.	00 Fi	ling Fee	(1) \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fitting Fee of Certified Copy (additional copy is enc		\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

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110 Geneva Drive, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

·	10/00/0	0.10
The Articles of Organization for this Limited Liability Co.	mpany were filed on $\frac{10/22/2}{}$	and assigned
Florida document number 1.18000248280	_•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
White Rose Block C, LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
	-PAL	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	 _	
B. If amending the registered agent and/or registered eagent and/or the new registered office address here:	office address on our recor	ds, enter the name of the new regis
agent and/of the new registered office address here.		
Name of New Registered Agent:		
Traine of the Registered regent.		······································
New Registered Office Address:	Enter Florida si	traat viidress
	City	, Florida Zip Code
N - Particulation (2.6% - 1.4% - 2.7% - 1.4%		zip Coae
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent as		

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
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		□Change	
			□Add
			□Remove
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l'ffactiv	ve date, if other than the date of filing:	(optic	onal)
L'HICKU	ctive date is listed, the date must be specific and cannot be prior to date of filing or	r more than 90 days after	filing.) Pursuant to 605,020
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Filing Fee: \$25.00