118000259845

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COVER LETTER

TO:		istration Sec ision of Corp			
	evr	Lake Suzy A	Air Estates, LLC		
SOBJEC	CT:		Name of Limit	ed Liability Company	
The enc	losed	Articles of z	Amendment and fee(s) are subn	nitted for filing.	
Please re	eturn	all correspor	ndence concerning this matter to	o the following:	
			Paul Hartz		
				Name of Person	
			Eake Suzy Air Estates, LLC		
				Firm/Company	
			12385 SW Austin Avenue		
			<u></u>	Address	
			Lake Suzy, FL 34269		
			City/State and Zip Code		
			paul4751@comcast.net	o be used for future annual repo	t notification)
					· notification;
For furt	ther i	nformation c	oncerning this matter, please ca		
John J.	. Hag	erman		941 629-38 at () Area Code 13	25
		Name o	of Person	Area Code 13	aytime Telephone Number
Enclose	ed is	a check for th	he following amount:		
■ \$25	5.00 1	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
			ING ADDRESS:	STREET/CO	OURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2018 KOV 13 M 3: 04

Lake Suzy Air Estates, LLC

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

(A Florida Limited Liability Company)

(7)	(I lottoa timmed ti	donny company	40m	ć.
The Articles of Organization for this Limited Liab Florida document number 1.18000259845		were filed on November 6	2018 and assigned	.∢
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabi	lity company here:		
The new name must be distinguishable and contain the wor	rds "Limited Liabili	ty Company," the designation	"LLC" or the abbreviation "L.L.C."	_
Enter new principal offices address, if applical	ble:			_
(Principal office address MUST BE A STREET	ADDRESS)			<u> </u>
Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE B	(OX)			-
B. If amending the registered agent and/o registered agent and/or the new registered offi	r registered of ice address here	fice address on our re	cords, <u>enter the name of the</u>	<u>e new</u>
Name of New Registered Agent:				_
New Registered Office Address:		Enter Florida street o	ukiress	
			Florida	
		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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael Carriere	11601 SW Academy Drive Lake Suzy, FL 34269	Add
			■ Remove
			Change
MGR Ar	Armand Despres	12539 Kingsway Circle Lake Suzy, FL 34269	
			■ Remove
			Change
MGR Tim Paramzino	Tim Paramzino	12481 SW Austin Avenue Lake Suzy, FL 34269	D Add
			■ Remove
			☐ Change
MGR TJ	TJP Ventures, LLC	209 Lychee Road Nokomis, FL 34275	■ Add
			□ Remove
			Change
			□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change

D. If am	ending any other inform EIN # 83-2478495	ation, enter change(s) here: (Attach additional sheets, if necessary.)
	•	
Note	: If the date inserted in this	ne date of filing:
	ecord specifies a delayer e 90th day after the re	ed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ecord is filed.
Date	d November 9	2018 Signature of a member or authorized representative of a member
	John J. Hagerman	

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00