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TO: Registration Section **Division of Corporations** Winter Garden Flospitality LLC SUBJECT: 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: Dheeraj Reddy K Name of Person Winter Garden Hospitality LLC Firm/Company 7614 Clementine Way Address Orlando, FL - 32819 City/State and Zip Code megkreddy@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 407 247 6685 Dheeraj Reddy Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$30,00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. ☐ \$25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## IU ARTICLES OF ORGANIZATION **OF**

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

The Articles of Organization for this Limited Liability Company Florida document number L18000266521	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7614 Clementine Way	
(Principal office address MUST BE A STREET ADDRESS)	Orlando , FL - 32819	2022 SE
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	7614 Clementine Way Orlando , FL - 32819  address on our records, ent	MOV 28 PAIR 19
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	lress
	,	Florida
<del></del>	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.

<b>.</b>	•	_	- 4	•		•	-	•	•	 ~	••	•	•	٠	•	<u></u> +	•

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Dheeraj Reddy K	7614 Clementine Way	
		Orlando , FL - 32819	_
			□Remove
			□ Change
MGR	Cannon George	1500 Park Center Drive	Schange
NOK	Cannon George	1.AVI die Conci 17470	
		Orlando , FL - 32835	
			<b>■</b> Remove
			☐ Change
MGR	Parsons Dale	2909 Fairgreen Street	<b>-</b>
		2 1 17 22002	
		Orlando, FL32803	Remove
			Archove
			□ Change
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			□Remove
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			Cochange
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			Change
			7
			□ Add
			□Remove
			□Change

Note:	tive date, if other than the date of filing:
f the reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the iled.
	11/16/2022
Dated	

Dheeraj Reddy K