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(Reque	estor's Name)	
(Addre	ss)	
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(Docum	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filir	ng Officer:	

Office Use Only



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COVER LETTER

TO:

	Registration Se Division of Cor			
aus usa	HIGH SUR	F. LLC		
SUBJEC	-I: <u></u> -	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	، من ۽
		SHANNON L WIDMAN		ę · . *
			Name of Person	
		PORATH & ASSOCIATE	ES PA	
			Firm/Company	
		600 GRAND BLVD #201		
			Address	
		DESTIN, FL 32550		
			City/State and Zip Code	
		SHANNON@PORATHLA		, v
For furth	er information o	oncerning this matter, please c	to be used for future annual report noti	neation)
			850 622-0102	
SHANNON L WIDMAN Name of Person		at ()	e Telephone Number	
Enclosed	l is a check for th	ne following amount:		
\$25.	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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section in of Corporations ox 6327 issee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	on rations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIGH SURF, LLC

(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 were filed on JANUARY 30, 2019 and assigned
Florida document number L19000031530
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 abbreviation "LLC."
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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
Florida
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>	Name	Address	Type of Action
MGR	HILARY FARNUM-FASTH	227 SEABREEZE CT	
		INLET BEACH, FL 32461	
		·	
MGR	VIJAY PATEL	8319 SURF DRIVE UNIT D	Change
		PANAMA CITY BEACH, FL	■ Add
		32408	Remove
			Change
			Add
			Remove
			Change
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Note: If the dat	e inserted in this b	lock does not m	eet the applicab	date of filing or mor	(option te than 90 days after fi requirements, this o	nal) ling.) Pursuant to 6 late will not be li	05.0201 sted as
iocument s'effe	ctive date on the I	repartment of St	ate's records.				
	ecifies a delaye ay after the re		ate, but not	an effective tir	ne, at 12:01 a.	m. on the ear	lier o
Dated <u>HQ</u>	rch 2	2	201 ^C	Ì.			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00