## 119000057 706

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<del>&gt;</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

Divis	ion of Corp	orations		
( SUBJECT: _	Orange Hill	Storage, LLC		
		Name of Lim	ited Liability Company	
The enclosed a	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return a	ill correspor	ndence concerning this matter	to the following:	
		Leah C. Brook		
			Name of Person	
		Northwest Equity Group, L	LC	
			Firm/Company	
		1232 South Blvd.		
			Address	<del></del>
		Chipley, FL 32428		
			City/State and Zip Code	
		leahbrook@gmail.com		
		E-mail address: (	to be used for future annual report notific	cation)
For further inf	ormation co	ncerning this matter, please ca	ıil:	
Leah C. Brook	_		334 798-1627 at ()	
	Name of	Person	at () Area Code Daytime	Telephone Number
•				
Enclosed is a c	heck for the	e following amount:		
<b>■ \$</b> 25.00 Fil	ing 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)

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Orange Hill Storage, LLC					
( <u>Name of the Limited Lia</u> (A Flo	bility Comparida Limited I	ny as it now appears on ou Liability Company)	r records.)		•
he Articles of Organization for this Limited Liability	y Company	were filed on February,	27, 2019	and a	ssigned
lorida document number L19000057706	<del></del> -				
his amendment is submitted to amend the following	i <del>.</del>				
. If amending name, enter the new name of the l	imited liabi	ility company here:			
	<del> </del>				
ne new name must be distinguishable and contain the words "I	Limited Liabil		on "LLC" or the ab	breviation '	L.L.C."
Enter new principal offices address, if applicable:		1232 South Blvd.	<del></del>		
Principal office address MUST BE A STREET AD	DRESS)	Chipley, FL 32428	<u>, -</u>	<u> </u>	
			<u></u>	₹ <b>6</b> 0	TI
				; <u> </u>	
nter new mailing address, if applicable:		1232 South Blvd.	,*	~ <del>_</del>	T
Mailing address MAY BE A POST OFFICE BOX)	<b>;</b>	Chipley, FL 32428		တ္ ထု	J
				17	
. If amending the registered agent and/or re	~		records, <u>enter</u>	the nam	e of the
egistered agent and/or the new registered office a	ddress here	2:			
Name of New Registered Agent: Lea	ah C. Brook				
New Registered Office Address: 123	32 South Blv	d.			
		Enter Florida stre	et address		
Chi	ipley		, Florida	428	
<del></del>		City		Zip Coa	le

## 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.

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>	<u>Address</u>	Type of Action
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Filing Fee: \$25.00