## L19 0000 85314

(Re	equestor's Name)	
(Ac	idress)	
	ddress)	·
(Ci	ty/State/Zip/Phone	<b>#</b> )
_	☐ WAIT	_
(Bı	usiness Entity Nam	e)
(Oc	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	
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SECRETARY OF STATE

## **COVER LETTER**

	Registration Se Division of Cor			
SUBJEC		BY CROSSCREEK LLC		
SUBJEC	.1:	Name of Limi	ited Liability Company	
The enck	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Carlton Campbell		
			Name of Person	
		Shores By Crosscreek LLC		
			Firm/Company	
		4020 11th St Ct W		
			Address	
		Palmetto, FL 34221		
			City/State and Zip Code	
		carlton@crosscreekenv.com	i to be used for future annual report notif	
			·	ication)
For turth	er information c	oncerning this matter, please ca	all:	
Carlton (	Campbell		941 539-5992	
	Name o	î Person	at ()	: Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	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)
	Mailing Addres Registration 5		Street Address: Registration Sec	etion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHORES BY CROSSCREEK LLC		
( <u>Name of the Limited Liah</u> (A Flor	oility Company as it now appears on our reco ida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Florida document number <u>L19000085314</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		er the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	ress
	•	Classida
<del></del>	I	FloridaZip 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 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
P	Carlton & Tonya Campbell	4020 11th St. Ct. W.	□Add
		Palmetto, FL 34221	□Remove
			Change
ρ	TONYA CAMPBELL	4020 11th St. ct. W. PALMETTD, FL 34221	□Add
	PALMETTD, FL 34221	□Remove	
			□Change
			□Add
			□Remove
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			□ Change

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r cc	Constitute of the state of the
(If an el Note:	(optional)  feetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
he reco ord is f	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 led.
Dated	Castrad Coll
	Signature of a member or authorized representative of a member