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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PIER RIDGE REALTY-JACKSONVILLE 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 $\frac{05/20/2019}{1}$ and assigned Florida document number _ L19000135334 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PIER RIDGE REALTY LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 12000 DALE MABRY HWY STE 222 Enter new principal offices address, if applicable: **TAMPA, FL 33618** (Principal office address MUST BE A STREET ADDRESS) 841 PRUDENTIAL DRIVE STE 1200 Enter new mailing address, if applicable: JACKSONVILLE, FL 32207 (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: TAXPROS FINANCIAL LLC

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

TAMPA

12000 N DALE MABRY HWY STE 222

If Changing Registered Agent. Signature of New Registered Agent

Enter Florida street address

COVER LETTER

	egistration Sect vision of Corpo			
SUBJECT	PIER RIDGE	REALTY-JACKSONVILL	E LLC	
	·	Name of Lin	nited Liability Company	
The enclose	ed Articles of Ai	mendment and fee(s) are sub	omitted for filing.	
Please retur	n all correspond	dence concerning this matter	to the following:	
		TRACIE PENA		
			Name of Person	<u> </u>
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For further i	information con	cerning this matter, please c		; i 1
Traci	F PENG Name of P	erson	at (<u>GOU</u>) <u>476 - 5</u> Area Code Daytin	1470 ne Telephone Number
Enclosed is	a check for the	following amount:		
□ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Ma	ulling Address:		Street Address:	

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

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
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			□Remove
			Change
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etive date, if other than the date of effective date is listed, the date must be spe e: If the date inserted in this block document's effective date on the Department.	cific and cannot be prior to date es not meet the applicable s	of filing or more than 90 days a	ptional) ifter filing.) Pursuant to 605.02 this date will not be listed
ord specifies a delayed effective date, filed.	but not an effective time, at	12:01 a.m. on the earlier of	(b) The 90th day after th
d FEBRUARY 01	2024		
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- Indul	ure of a member or authorized i		