5/12/2020

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ---OLD FLORIDA RV RESORT, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Old Florida RV Resort, LLC		
(Name of the Limited Liability Comp (A Florida Limited	nany as it now appears on our reco d Liability Company)	ords.)
The Articles of Organization for this Limited Liability Compan Florida document number L20000038179	y were filed on January 31, 20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
SWJR Land Development, LLC		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "L	LC" or the abbreviation "L.L.C."
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 agent and/or the new registered office address here:	e address on our records, <u>ent</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ada	dress
	City	Florida Zip Code
	2,	

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 m	nanage, enter the title, nan	H20000140840 3	adde
or removed from our records: MGR = Manager		²⁰²⁰ ΜΑΥ /2 Pil 1:00		
AMBR = A	uthorized Member		, •	
<u>Title</u>	Name	Address	Type of Action	<u>on</u>
		**	□Remove	
			□Change	
			□Add	
			□Remove	
			□Change	
			□Add	
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		□Remove		
			□Change	
			□Remove	
			□Change	

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. If amending any other informs	ation, enter change(s) here: (A	nter change(s) here: (Attach additional sind yithnecessary.)		
E. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	plock does not meet the applicable	late of filing or more than 90 day e statutory filing requiremen	(optional) s after filing.) Persuant to 605.0207 (3 ts, this date will not be listed as th	
f the record specifies a delayed effec ecord is filed.	tive date, but not an effective time	, at 12:01 a.m. on the earlier	of: (b) The 90th day after the	
Dated May 12	2020			
7.5	17 8/			
	Signature of a member or authoriz	ed representative of a member		
Matthew L. Grabinsk	ii, Authorized Representative			
	Typed or printed i	name of signee		