

Electronic Filing Menu Corporate Filing Menu

Help

S. ROBERTS

JUL 12 2023

	* ROCKLEDGE FL OPCO	ARTICLES OF C	O DRGANIZAŤION DF	
	ROCKLEDGE FL OPCO			
				,
		.•	-	
		·		
	(<u>Name of</u>		ny as it now appears on our records.) Liability Company).	
		(A Florida Elmited)	Liability Company).	
ኘኩል ላ	rticles of Organization for this I	inited Linkility Company		and a set out of
	rticles of Organization for this L		were filed on	_ and assigned
Florid	a document number L200000472	+) '		
This 4	mendment is submitted to amend	the following		
1113 4		r aro tonowing.		
A. Ìf	amending name, <u>enter the new</u>	name of the limited liab	ility company here:	
	•			
The new	v name must be distinguishable and con	stain the words "Limited Einhil	ity Company," the designation "LLC" on the abbrev	intian I I C
1110 1101	, name night of orstinguistance and con	none me wordy i smined triasi	*	
Enter	new principal offices address, i	if applicable:	615 Crescent Executive Court, Suite 100?	<u>V</u>
(Princ	ipal office address MUST BE A	STREET ADDRESS)	Lake Mary, Florida 32746	
			615 Crescent Executive Court, Suite 100	ېن
Enter	new mailing address, if applica	ıble:		<u> </u>
(Maili	ng address MAY BE A POST O	FFICE BOX}	Lake Mary, Florida 32746	

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

2023-07-11 18:18:54 GMT (((H23000242985 3))) 17183041175

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
	·····		ŪAdd
			🗆 Remove
		·	DChange
			🖸 Add
		. <u></u>	
			DChange
N			DbAC
			Change
			[.] Add
			🛛 Remove
· · · - · · · · · · · · · · · ·	<u></u>		□Add
			🖸 Remove
			ÜChange
			🖸 Add
		<u></u>	🗍 Reinove

(((H230002429853)))

(((H23000242985 3)))

D. If amending any other information; enter change(s) here: (Attach additional sheets, if necessary.)

		
		<u> </u>
		
•		
E. Effective (If an effect <u>Note:</u> If document	e date, if other than the date of filing:	605.0207 (3)(b) listed as the
If the record s record is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	ifter the
Dated	M MM	
	Signature of a Member or authorized representative of a member	

Robert Schoenfeld

Typed or printed name of signec