

120000069673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

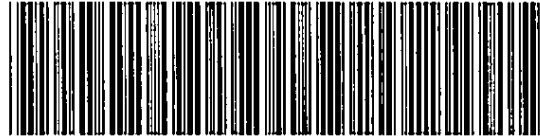
(Business Entity Name)

(Document Number)

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22 AUG 31 PM 4: 04  
DIVISION OF CORPORATIONS  
CLERK OF THE COURT

*Crabtree Law Group, P.A.*

ATTORNEYS AND COUNSELORS AT LAW

ZACHARY C. CRABTREE  
CHARLES W. BROWN, JR.

8777 SAN JOSE BOULEVARD  
BUILDING A, SUITE 200  
JACKSONVILLE, FLORIDA 32217

A.M. CRABTREE, JR.  
(1924-1995)  
R.R. CRABTREE  
(1955-2017)

TELEPHONE (904) 732-9701  
TELECOPIER (904) 732-9702

August 29, 2022

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

Re: Entity: Rumble Ridge, LLC  
Document Number: L20000069673  
Date Filed: 03/05/2020  
Documents Requested: Amendment to the Articles of Incorporation

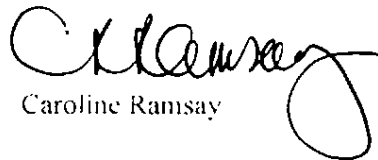
22 AUG 31 PM 4: 04  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

To Whom It May Concern,

In reference to the above described matter, we would like to request an amendment to the Articles of Incorporation for Rumble Ridge, LLC. Enclosed please find a check made out to the Florida Department of State in the amount of \$25.00 for payment.

If you have any questions please contact the office at 904-732-9701 or you can email [err@crabtreefirm.com](mailto:err@crabtreefirm.com). Thank you for your help with this matter.

Sincerely,

  
Caroline Ramsay

err  
Enclosures

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Rumble Ridge, LLC, a Florida limited liability company  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Wilkinson

Name of Person

Firm/Company

8627 Pebble Creek Lane

Address

Jacksonville, Florida 32256

City/State and Zip Code

mark@wilkepa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Wilkinson 904 470-4010  
Name of Person at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**Mailing Address:**

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

**Street Address:**

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

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OFFICE OF THE  
CLERK OF THE  
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Rumble Ridge, LLC, a Florida limited liability company

(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 03/05/2020 and assigned  
Florida document number L20000069673.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8627 Pebble Creek Lane

Jacksonville, Florida 32256

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8627 Pebble Creek Lane

Jacksonville, Florida 32256

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CLERK OF CIRCUIT COURT

**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:**

Name of New Registered Agent:

Mark Wilkinson

New Registered Office Address:

8627 Pebble Creek Lane

*Enter Florida street address*

Jacksonville

*City*

Florida 32256

*Zip 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.*



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>	<u>Type of Action</u>
MGR	Janet S Rumble	6526 Christopher Point Road West	<input type="checkbox"/> Add
		Jacksonville, Florida 32217	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mark Wilkinson	8627 Pebble Creek Lane	<input checked="" type="checkbox"/> Add
		Jacksonville, Florida 32256	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jonni Wilkinson	8627 Pebble Creek Lane	<input checked="" type="checkbox"/> Add
		Jacksonville, Florida 32256	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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VISION OF CHILDREN

(If an effective 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 (3)(b)

If the record 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 record is filed.

Dated

August 29

2022

Signature of a member or

Signature of a member or authorized representative of a member

Jonni Wilkinson  
representative of a member

Mark Wilkinson

Jonni Wilkinson

Typed or printed name of signee

**Filing Fee: \$25.00**