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Electronic Filing Cover Sheet

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; C T CORPORATION SYSTEM Account Name

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: (954)208-0845 Fax Number

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN IDEAL RANCH, LLC

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Electronic Filing Menu

Corporate Filing Menu

AUG 1 4 2020

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	IDEAL RANCH			
(Name of the Limite	d Ulability Company at A Florida Limited Liabi	il now oppears on our records.) ity Company)		
The Articles of Organization for this Limited Lic Florida document number <u>L20000071975</u>	bility Company wer		end assigned	
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability	company here:		
The new name must be distinguishable and contain the w	ords "Limited Liability ("ompany," the designation "ld.C" or the	e abbreviation "L.E.C."	
Enter new principal offices address, if applic	able: _			_
(Peincipal office address MUST BE A STREE	T ADDRESS)			-
	-			_
Enter new mailing address, if applicable:				(j)
(Mailing address MAY BE A POST OFFICE	ROX)		170	
Maung augress HAT BEAT VOLUTTEE				_ :
				·tanad
B. If amending the registered agent and/or agent and/or the new registered office address	registered office add ss here:	iress on our records, enter the f	_	<u>tereu</u>
agent and the tree registered			Ū	
Name of New Registered Agent:	Floyd A. Dias		<u> </u>	- - ^F
New Registered Office Address:	1731 Palm Lane		0.0	
NOW NEGOTICAL DESIGNATION.		Enter Florida street address		
	Nokomis	, Florida	a 34275 Zip Code	
		City	z.p Coae	
New Registered Agent's Signature, if changing	Reaktered Agent:			
I hereby accept the appointment as register provisions of all statutes relative to the propaccept the obligations of my position as regions filed to merely reflect a change in the company has been notified in writing of this	per and complete pe fistered agent as pro Pregistered office a	erformance of my auties, and i wided for in Chapter 605, F.S.	Or, if this document	,
		Abyd A. A	ow Hestistered Agent	
	tt Chang	till reflereten vissur billustate of ve		

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> Fitle</u>	<u>Name</u>	Address	Type of Action
MGR	Fiona P. Dias	1731 Palm Lune	DAdd
		Nokomis, FL 34275	≅Remove
			□Change
			DAde
			□Remove
			GChange
			
			☐ Remove
			□ Change
 			Dadd
			□Remove
			Cilonge
			SAdd
	·		© Remove
			—————————————————————————————————————
			☐ Change

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	(optional) clive date is listed, the date must be specific and current be prior to date of filing or more than 90 days efter filing.) Pursuant to 605,020 clive date is listed, the date must be specific and current be prior to date of filing or more than 90 days efter filing.) Pursuant to 605,020 clive date is listed, the date will not be listed as
late-	ctive date is listed, the date must be specific and carried be prime to use in image in large that. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted as int's effective date on the Department of State's records.
reum.	int's effective date on the Department of Said 3 fections
	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
recon lit ci L	ed.
	2020
ated .	8 12 2020
	2/1/1/11/11
	Signature of a member or authorized representative of a member
	Floyd A. Dias, as Trustee of the Floyd A. Dias Revocable Trust, as a Member

Filing Fee: \$25.00