L20000153643

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	~ ~
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TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

1020 Land.	, LLC		
30B3DCT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jonah Weaver		
		Name of Person	····
	1020 Land, LLC		
		Firm/Company	* *
	1095 MILITARY TRAIL	#2441	
	· · · · · · · · · · · · · · · · · · ·	Address	
	JUPITER, FL 33458		
		City/State and Zip Code	
	E-mail address; (to be used for future annual report no	tification)
For further information of	oncerning this matter, please c	all:	
Jonah Weaver		561 5689292 at ()	
Name o	f Person	Area Code Dayti	mc Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	aution
Registration Division of C		Registration S Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1020 Land, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on	and assigned
Florida document number L20000153643		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the	abbreviation "L.1C,"
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		7.75
		30
Enter new mailing address, if applicable:		æ ~
(Mailing address MAY BE A POST OFFICE BOX)		
Maung duaress MAT BE A TOST OF FICE BOXY		
		_
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the n</u>	ame of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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.

If 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>	Address	Type of Action
Р	Jonah Hill	1095 MILITARY TRAIL #2441	□ Add
		JUPITER, FL 33458	■Remove
			□ Change
P	Jonah Weaver	1095 MILITARY TRAIL #2441	
		JUPITER, FL 33458	□ Remove
			□ Change
			□Add
			□Remove
			□Add
			□Remove
			□Add
			□ Remove
			Change
			□ Add
			□ Remove
			□Change

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record specific is filed.	s a delayed effec	tive date, but n	ot an effectiv	e time, at 12:	I a.m. on the e	arlier of: (b)	The 90th day after	r the
ated Decemb	er 15		2020					
aicu		7/		*				
	₩ .	1 - 1 •	/					
	- March	Signature of	a member or a	uthorized repre	sentative of a mer	nber		

Filing Fee: \$25.00