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(Req	uestor's Name)	
(Adda	ess)	
(Addr	ress)	
(Cib.)	State/Zip/Phone	. 40
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PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doci	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ting Officer:	

Office Use Only



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12/04/24--01012--008 **25.00



JAN 16 S. PRATHER

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT: OR	LANDO CTY BAY	SEBALL DREAMER	RS, LLC
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JIM SC	HNORE Name of Person	
	OPLANDO CITY	BASEBALL DREAME Firm/Company	ers, ILC
	531 ESTATI	ES PLACE Address	
	LONGWOOD, FI	_ 337 79 City/State and Zip Code	
	JSCHNOFF OW E-mail address: (1	City/State and Zip Code 55 Capitalo COM to be used for future annual report no	tification)
For further information c	oncerning this matter, please ea		
JIM Sc Name o	HUORF f Person	at (407) 435- Area Code Daytin	-7163 me 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 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7

ORLANDO CITY BY (Name of the Limited I	SEBALL OREAMERS LI Liability Company as it now appears on our recor Florida Limited Liability Company)	<u>C</u>
The Articles of Organization for this Limited Liabi	lity Company were filed on $8/3/30$. •
This amendment is submitted to amend the followi	ng:	· · · · · · · · · · · · · · · · · · ·
A. If amending name, <u>enter the new name of th</u>	e limited liability company here:	
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	-	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or regis		the name of the new registe
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Enter Florida street addre	ss
-		lorida
	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
MGR	RUTH WILLIAMS	375 DUBSDREAD CIRCLE	X Add
		ORLANDO, FL 32804	□Remove
			□Change
MER	PATWILLIAMS	375 DUBSDREAD CIRCLE	□Add
-	ORLANDO, FL 32804	X Remove	
			Change
		□Add	
		□Remove	
		🗆 Change	
		□Add	
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		□Remove	
			□Change

nding any other information, enter change(s) here: (Attach additional sheets, if necessary)	rv.)
	
	
	
	
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ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filir f the date inserted in this block does not meet the applicable statutory filing requirements, this day	ig.) Pursuant to 605.0207 (3
	The 90th day after the
1/29/24 Jim Ahmar	2004
Signature of a member or authorized representative of a member	<u>;</u>
	ve date, if other than the date of filing: cive date, if other than the date of filing: (optiona (optiona If the date instruct in this block does not meet the applicable statutory filing requirements, this dant's effective date on the Department of State's records. Is specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) (d) (d)