La 0000 244296

(Requestor's Name)
(,	Address)
(,	Address)
	City/State/Zip/Phone #)
,	
PICK-UP	WAIT MAIL
(1	Business Entity Name)
(1	Document Number)
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	J. HORNE
	J. HORNE JUN - 9 2022

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2022 JUN -8 PM 1:24

COVER LETTER

	istration Sec sion of Corp			
		lanagement, LLC		
SUBJECT:			ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Jack E. Kiker, III Esq.		
			Name of Person	
		Williams, Gautier, Gwynn	, Deloach & Kiker, P.A.	
			Firm/Company	
		2010 Delta Boulevard		
			Address	
		Tallahassee, FL 32303		
			City/State and Zip Code	
		Jake.Kiker@williamsgautic		
For further in	formation co	E-mail address: (oncerning this matter, please c	to be used for future annual report notifi all:	cation)
Jack E. Kiker	r, III		850 386-3300	
	Name of	Person		Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling 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)
Reg	ling Address distration S	_	Street Address: Registration Sec Division of Corp	
P.O	. Box 632°	7	The Centre of Ta	ıllahassee
Tall	lahassee, F	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Clear Path Management, LLC

company has been notified in writing of this change.

2022 JUN -8 PM 12: 40

(Name of the Limited Liability (A Florida L	Company as it now appears or imited Liability Company)	n our records.) SECRETARY OF STATE TALLAHASSEE, FLOST
The Articles of Organization for this Limited Liability Co. Florida document number L20000244296		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	:
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the desig	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our reco	ords, enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	street address
		, Florida Zip Code
New Registered Agent's Signature, if changing Registered	• •	<i>Σι</i> ρ €οαν
I hereby accept the appointment as registered agent a.		pacity. I further agree to comply with
provisions of all statutes relative to the proper and co	mplete performance of my	v 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

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	Giancarlo Cangelosi	7150 SW 178th Ave	= Add
		SW Ranches, Florida 33331	□ Remove
			□ Change
	<u></u>		□ Add
			□Remove
			□ Change
		<u></u>	□Add
			□Remove
			□Change
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iore: ir me o	e, If other than the dat te is listed, the date must be ate inserted in this block fective date on the Depar	does not meet the appl	licable statutory filin	(option fore than 90 days after fi g requirements, this o	ial) ling.) Pursuant to 605.020 late will not be listed a
record specif is filed.	es a delayed effective da	te, but not an effective	time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
ated June 2r	1	2022	Was.	1	>
	- V.121X	- HAM	1 XX		
	Sign	nature of a member or ful	thorizon pepresentalive	of a member	

Filing Fee: \$25.00