

L20000282973

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000346948 3)))



H220003469483ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : DES-MATT, INC  
Account Number : I20180000078  
Phone : (352)223-3911  
Fax Number : (863)318-8218

FILED  
2022 OCT 10 PM 4:11  
TALLAHASSEE, FLORIDA

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

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
OLD PINE GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2022 OCT 10 AM 11:37

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 OCT 10 PM 4:11 LEGAL SERVICES FALLAHASSET, FLORIDA

OLD PINE GROUP, LLC

(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 09/10/2020 and assigned Florida document number L20000282973

This amendment is submitted to amend the following:

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

N/A

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:

419 NORTH WEST STREET

(Principal office address MUST BE A STREET ADDRESS)

STE. 407

BUSHNELL, FL 33513

Enter new mailing address, if applicable:

419 NORTH WEST STREET

(Mailing address MAY BE A POST OFFICE BOX)

STE. 407

BUSHNELL, FL 33513

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: JOSE ACEVEDO

New Registered Office Address: 419 NORTH WEST STREET STE. 407

Enter Florida street address

BUSHNELL, Florida 33513

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.

Jose Acevedo

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	JOSE ACEVEDO	WEST NORTH STREET 407	<input type="checkbox"/> Add
		BUSHNELL, FL 33513	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ABBY CORTES	2400 VOLUSIA AVE.	<input checked="" type="checkbox"/> Add
		ORANGE CITY, FL 32763	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	DARLING STEVEN J	419 WEST NORTH STREET 407	<input type="checkbox"/> Add
		BUSHNELL, FL 33513	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DARLING STEVEN J	419 NORTH WEST STREET STE. 407	<input checked="" type="checkbox"/> Add
		BUSHNELL, FL 33513	<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

2012 007 10 4:11 PM  
ALLIANCE FLORIDA

FILED

