## L20000289677

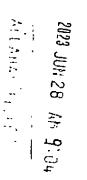
(Reque	stor's Name)
(Addres	ss)
(Addres	
(Addres	55)
(City/St	ate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busine	ss Entity Name)
(Docum	nent Number)
Certified Copies	Certificates of Status
Special Instructions to Filin	g Officer:

Office Use Only



500411274375

06/28/23--01017--013 \*\*25.00





## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 2000

Conch City L.I.C.

Conch City L.L.C.		υ. <u>Ų</u> 4
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company) 27.	
The Articles of Organization for this Limited Liability Com	pany were filed on 09-15-2020	and assigned
Torida document number 1.20000289677		,
his amendment is submitted to amend the following:		
a. If amending name, <u>enter the new name of the limited</u>	liability company here:	
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		1
Principal office address MUST BE A STREET ADDRES.	<u> </u>	
Inter new mailing address, if applicable:	26 Transylvania ave	
Mailing address MAY BE A POST OFFICE BOX)	Key Largo, FL 33037	
3. If amending the registered agent and/or registered of	fice address on our records, enter th	ie name of the new regis
gent and/or the new registered office address here:		
Name of New Registered Agent:		
Name Danigtamed Office Addms as		
New Registered Office Address:	Enter Florida street address	
	, Flor	ida
<del></del>	Cuy	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. Thereby 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	Andrew Morris	26 Transylvania ave	
		Key Largo, FL 33037	□Remove
			<b>≣</b> Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗂 Add
			□Remove
			□Change
			Remove
			□ Change

		<del>.</del>				
		<del></del>				_
					<u>-</u>	
		-			<u>-</u>	_
					<u> </u>	
-			<del></del>	<u>.                                    </u>	-	
·					· <u>•</u> · ·	_
<u></u>						
						<del></del>
			• • •	*****		_
ffective date, if other than the an effective date is listed, the date motore: If the date inserted in this occument's effective date on the	block does not nieet	the applicable	te of filing or mor statutory fiting	(option of the control of the contro	onal) filing.) Pursuant to s date will not be	605,0207 listed as
record specifies a delayed effect lis filed.	ive date, but not an	effective time,	at 12:01 a.m. on	the earlier of: (b	) The 90th day a	ifter the
	2	2023				
ated	<u>_</u>					
ated June 16 /s/ Andrew Morris	Signature of a mem					

Filing Fee: \$25.00