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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
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Name Change

NOV 21 2022

FedEx.

Shipment Receipt

Address Information

Ship to: Ship from:

Florida Secretary of Wenthur Law Group,

State LLP

Wenthur Law Group,

LLP

P.O Box 6327 4121 Napier St.

TALLAHASSEE, FL SAN DIEGO, CA

32314 92110 US US

6193989050 6193989050

Shipment Information:

Tracking no.: 777464866236

Ship date: 07/22/2022

Estimated shipping charges: 8.75 USD

Package Information

Pricing option: FedEx One Rate

Service type: FedEx 2Day

Package type: FedEx Envelope

Number of packages: 1

Total weight:

Declared Value: 0.00 USD

Special Services:

Pickup/Drop-off: Use an already scheduled pickup at my

location

Billing Information:

Bill transportation to: WLG-443

Your reference:

P.O. no.: Invoice no.:

Department no.:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1621 JUL 20 Fin 3:58

Crockett Aquatic Adventures, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability compar	ı <u>y here</u> :		
Roadless Travel, LLC			
The new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on a agent and/or the new registered office address here:	our records, <u>enter the name c</u>	of the new registered	
Name of New Registered Agent:			
New Registered Office Address: Eme	r 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 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>	Type of Action
			□Add
		Remove	
			□Change
			\Add
			Remove
			□Change
			🗓 Add
			□Remove
			□Add
			Change
.			□Add
		□ Remove	
			□Change
			□Add
			□Remove
			☐ Change

		 		
	·			71/2-3-2
			<u> </u>	
				
Tective date, if other than th an effective date is listed, the date ma ote: If the date inserted in this b	ist be specific and cannot be lock does not meet the a	e prior to date of filing of applicable statutory fi	(optional) more than 90 days after filing.) ling requirements, this date v	Pursuant to 605,0207 (will not be listed as the
ocument's effective date on the I	Department of State's rec	cords.		
record specifies a delayed effecti is filed.	ve date, but not an effect	tive time, at 12:01 a.r	n, on the earlier of: (b) The	90th day after the
July 21	2022	·		
ated Strip 21				
ated July 21	·			
San Police	Annu Signature of a member of			

Filing Fee: \$25.00