L20000396853

(Requ	uestor's Name)
(Addi	ess)	
ibbA)	ess)	
(City/	State/Zip/Phor	ne #)
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(Busi	ness Entity Na	ime)
(Doct	ument Number	')
Certified Copies	Certificate	es of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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COVER LETTER

TO:

Registration Section

Division of	f Corporations					
	Barrow Pit 208 LLC					
SUBJECT:	Name of Person Area Code Daytime Telephone Number a check for the following amount: Filing Fee \$\Bigcup \$30.00 \text{ Filing Fee & }\Bigcup \$55.00 \text{ Filing Fee & }\Bigcup \$60.00 \text{ Filing Fee, }\Bigcup \$certificate of Status & \$Certificate of Status & \$Certificate of Status & \$Certified Copy (additional copy is enclosed) Area Code Daytime Telephone Number					
The englosed Articl	ies of Amendment and fee(s) are s	ubmitted for filing				
riease return an cor	respondence concerning this mate	er to the following.				
	Aaron J Smith Sr.					
		Name of Person				
	Smith Barrow Pit 208 Ll	LC				
		Firm/Company				
	5195 Stephen Colee Rd					
		Address				
	St. Augustine, FL 32092					
		·				
			otification)			
For further informa						
Aaron J Smith, Sr.						
Name of Person		Address Augustine, FL 32092 City/State and Zip Code risticjune78@gmail.com E-mail address: (to be used for future annual report notification) ning this matter, please call: at (
Enclosed is a check	for the following amount:					
■ \$25.00 Filing F		Certified Copy	Certificate of Status & Certified Copy			
	address: tion Section		Section			
Division	of Corporations	Division of C	Division of Corporations			
P.O. Box Tallahas	x 6327 see, FL 32314					

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Smith Barrow Pit 208 LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)	
he Articles of Organization for this Limited Liability Company	were filed on December 21, 2020	and assigned
orida document number L20000396853		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
ne new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		28 C
Principal office address MUST BE A STREET ADDRESS)		
		~ \$100
		t cost
nter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		N
		4 %
If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our records, enter the na	me of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Cotas Elevida wheat add	
	Enter Florida street address	
<u></u>	, Florida _	Zip Code
	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

michi —	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Charles D Hali	417 Pheasant Run	□Add
		Ponte Vedra Beach, FL 32082	Remove
			Change
AMBR	Christie J Hall	417 Pheasant Run	■Add
		Ponte Vedra Beach, FL 32082	
			Change
			□ Add
			□ Remove
			Change
			□ Remove
			□ Change
			🗆 Add
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			Remove
			□ Change

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effective	date is listed, the		cific and cannot be				ling.) Pursuant to 60	
		in this block doe on the Departme			tory filing requ	iirements, this	date will not be li	sted as
								
cord spe	cifies a delayed	l effective date, b	but not an effec	tive time, at 12	:01 a.m. on the	earlier of: (b)	The 90th day af	ter the
s filed.								
Febr	uarv 20		2021	1)				
ted Febr			——————————————————————————————————————		()			
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_		Signatui	re of a member of	r authorized repa	esentative of a n	iember		

Typed or printed name of signee