→ 18506176383 Division of Corporations

3/11/2021



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.

(((H21000099441 3)))



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

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

**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 BESAMAS KISSIMMEE HOLDING LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

ZOZITIAR I I PH I: 4

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BESAMAS KISSIMMEE HOLDING LLC		
(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number <u>L21000032952</u>	Company were filed on 02/02/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
Besamas Wildwood Holding LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>
(Principal office address MUST BE A STREET ADD:	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registere	ed office address on our records, <u>enter the i</u>	name of the new register
agent and/or the new registered office address here:		
		·
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	1.5
	Enter Florida in certain ess	
	, 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			⊖Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	· · · · · · · · · · · · · · · · · · ·					
-			-amax -			
_						
-						
-						
					······································	
_		, <u> </u>				
-						
-						
_						
-						
-			 			
_						
-			·			
-						
_						
ote:	tive date, if other than to flective date is listed, the date in. If the date inserted in this nent's effective date on the	block does not	meet the applica	to date of filing or nable statutory filin	(optionore than 90 days after ag requirements, this	onal) filing.) Pursuant to 605. date will not be liste
	rd specifies a delayed effectiled.	tive date, but no	ot an effective ti	me, at 12:01 a.m.	on the earlier of: (b) The 90th day after
1 15 11	N1		2021			
	March II		. !	_ ·	2	
	March 11			orized representative		

Filing Fee: \$25.00