La loo 100 4367

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporatio	ns
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≈ Fax Number : (850)617-6383

From:

 ∞ Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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

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CELLARY OF STATE LAHASSEE FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WORLD CLASS DEVELOPMENT LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

World Class Development 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 03/03/2021 and assigned Florida document number <u>L21</u>000104367 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (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 our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City

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 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
AMBR	Frank Laing	7901 4TH ST N STE 300	☑ Add
		ST. PETERSBURG, FL 33702	□ Remove
			Change
MGR_	Lydia Laing	7901 4TH ST N STE 300	☑ Add
		ST. PETERSBURG, FL 33702	□ Remove
			Change
			□ Remove
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			Remove
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			Remove
			☐ Change

D. If amendir	g any other information, enter change(s) here: (Atto	ch additional sheets, if necessary.)
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Note: If the	ate, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of date inserted in this block does not meet the applicable state effective date on the Department of State's records.	(optional) filling or more than 90 days after filling.) Pursuant to 605.0207 (3)(b) utory filling requirements, this date will not be listed as the
	specifies a delayed effective date, but not an el n day after the record is filed.	and the second s
		2021
_{Dated} <u>5/2</u>	2021	FILE
	\sim \sim	FILED
_	Signature of a member or authorized re	oresentative of a member
	Morgan Noble	oresentative of a member F S 1 A 1 0: \$
-	Typed or printed name	of signee

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