

L21000173545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

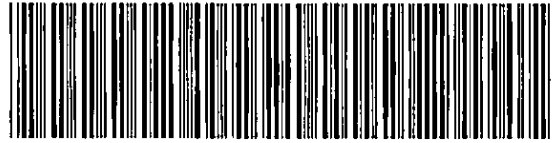
(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FIVE eagles GROUP LLC
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Paul Rich
(Contact Person)

Five eagles GROUP LLC
(Firm/Company)

112 SHERWOOD DR
(Address)

ROYAL PALM BEACH, FL 33411
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul Rich at (561) 267-1105
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Five Eagles Camp 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 04/14/21 and assigned Florida document number L21000173545

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)

112 Sherwood Dr.
Royal Palm Beach, FL
33411

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

112 Sherwood Dr.
Royal Palm Beach, FL
33411

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

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 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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Alexis</u> <u>PVS707W112</u>	<u>12903 Tangerine Blvd</u>	<input type="checkbox"/> Add
		<u>West Palm Beach, FL.</u>	<input checked="" type="checkbox"/> Remove
		<u>33412</u>	
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Matthews A Brito</u>	<u>12903 Tangerine Blvd</u>	<input type="checkbox"/> Add
		<u>West Palm Beach, FL.</u>	<input checked="" type="checkbox"/> Remove
		<u>33412</u>	
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Jose R Umbria</u> <u>NERO</u>	<u>49001 NW 55th St</u>	<input checked="" type="checkbox"/> Add
		<u>COconut Creek, FL.</u>	<input type="checkbox"/> Remove
		<u>33073</u>	
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Andrew Fernandez</u> <u>Villela</u>	<u>201 SE 6th Ave Apt 14</u>	<input checked="" type="checkbox"/> Add
		<u>Pompano Beach, FL.</u>	<input type="checkbox"/> Remove
		<u>33060</u>	
			<input checked="" type="checkbox"/> Change
<u>MGR</u>	<u>Paul Rich</u>	<u>112 Sherwood Dr.</u>	<input checked="" type="checkbox"/> Add
		<u>Royal Palm Beach, FL.</u>	<input type="checkbox"/> Remove
		<u>33411</u>	
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Manuel Alvarez</u>	<u>6855 Hau Blvd</u>	<input checked="" type="checkbox"/> Add
		<u>Wxahat Cncl, FL.</u>	<input type="checkbox"/> Remove
		<u>33470</u>	
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated NOVEMBER 9th, 2021

Signature of a member or authorized representative of a member

Walters A Brito

Typed or printed name of signee