Division of Corporations Electronic Filing Cover Sheet

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.

(((H21000305087 3)))



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

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : IVAN & DAUGUSTINIS, PLLC

Account Number : 120180000057 1 (904)395-2395 Phone

: (904)475-2121 Fax Number

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

Email Address: glenn.r.gross@gmail.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WHITE HORSE GROUP LLC

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AUG 1 6 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

## **COVER LETTER**

H210003050873

TO: Registration Division of C			
White Ho	orse Group, LLC		
SUBJECT:	Name of Lir	nited Liebility Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matter	r to the following:	THE 13
	Robert Daugustinis, Esq.		
		Name of Person	3
	Ivan & Daugustinia, PLLC		ā
	<del></del>	Finn/Company	<del></del>
	5150 Beifort Road, Buildi	ng 200	
	· · · · · · · · · · · · · · · · · · ·	Address	
	Jacksonville, Florida 3225	66	
		City/State and Zip Code	
	glenn,r,gross@gmail.com		
	E-mail address:	to be used for future nanual report not	fication)
For further information	concerning this matter, please c	all:	
Robert Daugustinis		904 395-2395 at ( )	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25 00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Stalus	☐ \$55.00 Filing Fee & Cortified Copy (additional copy is enclosed)	☐ \$60.00 Filing Pee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addr</u> Registration		<u>Street Address:</u> Registration Se	ction
_	Corporations	Division of Con	
P.O. Box 63	327	The Centre of T	
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810		e Street, State \$10	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H210003050873

(Name of the Limited Liability Compar (A Plorida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on April 20, 2021 and assigned
Plorida document number L21000182976	
This amendment is submitted to amend the following:	<b>್ಟ</b>
A. If amending name, enter the new name of the limited liabi	illity company here:
The now name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "LLC."
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 a agent and/or the new registered office address here:	address on our records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Floridu street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

H210003050873

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 = M $AMBR = A$	lanager uthorized Member		H2100030308/3
<u>Title</u>	<u>Name</u>	Address	Type of Action
Manager	Glenn R. Gross		□Add
			□Remove
			≅Change
Manager	Adora Alday Gross		□bbA□
			□ Remove
		<del></del>	■ Change
		<del></del>	□Add
			SECRETARY OF CO
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