

Florida Department of State
 Division of Corporations
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L21000192582

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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
 Account Number : 120070000020
 Phone : (813)435-3176
 Fax Number : (813)333-6358

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

Email Address: NS@NickSpradlin.com

2021 DEC 27 AM 10:11
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 GLADEWATER BAY, LLC**

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

2021 DEC 27 AM 10:17
 TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GLADEWATER BAY, 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 04/26/2021 and assigned Florida document number L21000192582.

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)

370 WEST PLEASANTVIEW AVE.

SUITE 163

HACKENSACK NJ 07601

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

370 WEST PLEASANTVIEW AVE.

SUITE 163

HACKENSACK NJ 07601

2021 DEC 27 AM 10:11
FILED
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

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>
MGR	NICK SPRADLIN, ESQ	18801 N. DALE MABRY HWY	<input type="checkbox"/> Add
		STE 119	<input checked="" type="checkbox"/> Remove
		LUTZ, FL 33548	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2022 DEC 27
 SECRET
 FEDERAL BUREAU OF INVESTIGATION
 U.S. DEPARTMENT OF JUSTICE

