121000209240

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





200372301642

09/10/21--01/16--073 +-30.00



01-11 7

COVER LETTER

l'O: Registration Se Division of Cor			_
subject: <u>Pcar</u>		Design LLC . ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ndence concerning this matter to	o the following:	
	Devon Bo	Name of Person	·
		Firm/Company	<u>. </u>
	920 Golder	Deach Blvd Address	
	Indian Harb	DOUT BEACH, FL City/State and Zip Code	32937
	devon betch E-mail address: (to	ellor C gmail. be used for future angual report notif	COM
or further information c	oncerning this matter, please cal	-	
DEVCO R	betchellor f Person		1822 Telephone Number
Enclosed is a check for the	ne following amount:		
☐ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

taradise l'ome & l'	Design IJC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it new appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L210023091340</u> .	
This amendment is submitted to amend the following:	·
A. If amending name, enter the new name of the limited liabil	ity company here:
Golden Beach Equestrica The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	920 Golden Beach Blvd
(Principal office address MUST BE A STREET ADDRESS)	Indian Harbour Beach, FL
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	32937
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida O T
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	39
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p	

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
			Remove
			☐ Change
			□Add
			ПRеточе
			Change
			□Add
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			☐ Change

							<u> </u>
	4,				M 177		
		*					
.,					·	·- <u>-</u> -	
				<u></u>		 -	
	· · · · · · · · · · · · · · · · · · ·		<u>.</u>		<u></u>	<u> </u>	
						*-	
							· · · · · ·
						 .	
	· ·						
-				·			·
					 	. =	
in effectiv o <mark>te:</mark> If th	date, if other that we date is listed, the da the date inserted in 's effective date on	ate must be specifi this block does (ic and cannot be pr not meet the app	licable statutory	or more than 90 day	(optional) s after filing.) Pursua ts, this date will no	nt to 605.0207 (t be listed as t
record sp is filed.						of: (b) The 90th o	day after the
ated	09/08/20	291	·	·	ative of a member		
		wow?	Betche	Was			
	\sim	Signat dre -	era member or au	itnorized represent	ative of a member		