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2021 SEP 27 PM 6: 17

COVER LETTER

Tallahassee, FL 32314

	ation Se n of Cor	ction porations			
	INDY RI	DGE RANCH, LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Ar	ticles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all	correspo	ndence concerning this matter	to the following:		
		Ryne E. Hartt, Esquire			
			Name of Person		
		Law Offices of Jennifer Pe	shke, P.A.		
			Firm/Company		
		4727 North Highway A1A			
			Address	_	
		Vero Beach, FL 32963			
			City/State and Zip Code	-	
		closingsupport@peshkelaw.			
		E-mail address: (to be used for future annual	report notifica	ation)
For further infor	mation c	oncerning this matter, please ea	all:		
Ryne Hartt, Esq	uire			1-1233	
	Name o	f Person	at () Area Code	Daytime T	elephone Number
Enclosed is a ch	eck for th	ne following amount:			
■ \$25.00 Filir		□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee a	e.	☐ \$60.00 Filing Fee.
≡ 323.00 Fill	ig rec	Certificate of Status	Certified Copy (additional copy is enc		Certificate of Status & Certified Copy (additional copy is enclosed)
	g Addres tration S		Street Ac	<u>ddress:</u> ation Secti	on
		Corporations		n of Corpo	
	30x 632	•		ntre of Tal	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

F

2021 SEP 27 PM 6: 17 2021 SEP

SECRET/ TALLAHA

WINDY RIDGE RANCH, LLC

RANCH, LLC

SECRETARY OF STATE

(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 Comparison for the Limited Liability Comparison of December $\frac{L21000230972}{L}$.	y were filed on May 18, 202	21 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility 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 agent and/or the new registered office address here: Name of New Registered Agent:	e address on our records, g	enter the name of the new registered
Name Damintaged Office Address		
New Registered Office Address:	Enter Florida street	address
		, Florida
	Ciņ	Zip Code
New Registered Agent's Signature, if changing Registered Agen	ıt:	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my duti s provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is
II C	nanging Registered Agent, Sign:	ature 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
MGR	Jury G. Krajack, Sr. Trust	8625 97th Avenue	
		Vero Beach, FL 32967	□Remove
			≡ Change
AMBR	Joann E Quail	8646 105th Avenue	
		Vero Beach, FL 32967	■Remove
			□Change
		- "	□Add
			□Remove
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Effective date, if othe fan effective date is listed, Note: If the date insert document's effective da	ed in this block does no	ot meet the applica	o date of filing or more able statutory filing re	(optional) than 90 days after filing.) equirements, this date v	Pursuant to 605.0207 vill not be listed as
e record specifies a dela rd is filed.	yed effective date, but i	not an effective tit	ne, at 12:01 a.m. on t	the earlier of: (b) The	90th day after the
September	23	2021			
Dated					
Dated	· seller	4 	-7-		
Dated	1	2 //	rized representative of	a member	

Filing Fee: \$25.00