h21000325725

Office Use Only



04/06/22--01009--021 **25.80

22 APR -6 PM 3: 50

T. MATTHEWS APR 2 1 2022

COVER LETTER

| SUBJECT: DI AMOND LONGS METNERSHIP LLC Name of Limited Liability Company |
|--|
| |
| |
| |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| MARL A. FREEMAN Esq. |
| Name of Person Firm/Company |
| Firm/Company |
| 2050 TAHLOR ALE STE A-15 |
| Address |
| Orianso, Fi 32806 |
| City/State and Zip Code |
| MARY C LOPE LEGAL - COM |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Name of Person Person at (A07) 250-607 Area Code Daytime Telephone Number |
| |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\Bigcup \text{\$\$30.00 Filing Fee & \$\Bigcup \text{\$\$55.00 Filing Fee & \$\Bigcup \text{\$\$Certified Copy (additional copy is enclosed)}}\$\Bigcup \text{\$\$\$\$60.00 Filing Fee, \$\Bigcup \text{\$\$Certified Copy (additional copy is enclosed)}}\$\Bigcup \text{\$\$\$\$\$\$\$\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$ |
| Mailing Address: Street Address: |
| Registration Section Registration Section |
| Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee |

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT

TO SECRETARY OF STATE ARTICLES OF ORGANIZATION DIVISION-OF CORPORATIONS OF

| 2 | 1 01 | 7 | 22 APR -6 | PH 3: 50 |
|---|--|---|--------------------------------------|--------------------------------------|
| Diamon | us Llones l | Almerski | | |
| (Name of the Limited | Liability Company as i Florida Limited Liabilit | t now appears on our y Company) | records.) | |
| Flie Articles of Organization for this Limited Liab | pility Company were | | 2021 | and assigned |
| This amendment is submitted to amend the follow | ring: | | | |
| A. If amending name, enter the new name of t | <u>he limited liability c</u> | ompany here: | | |
| The new name must be distinguishable and contain the wor | ds "Limited Liability Con | npany," the designation | n "E1.C" or the abbi | reviation "L.L.C." |
| Enter new principal offices address, if applical | ole: | | | |
| Principal office address MUST BE A STREET | ADDRESS) | | | |
| | | | | ··· |
| | | | | |
| Enter new mailing address, if applicable: | | | | |
| Mailing address MAY BE A POST OFFICE B | <u> </u> | | | |
| | | <u>,</u> | | |
| B. If amending the registered agent and/or reg | gistered office addre | ss on our records, | enter the name | of the new registered |
| agent and/or the new registered office address | | | | |
| | | | | |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | | Enter Florida street | | |
| | | emer r toriau street | uuuress | |
| | | in — | , Florida | Zw Code |
| New Registered Agent's Signature, if changing Re | | ** | | , |
| I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registabeing filed to merely reflect a change in the recompany has been notified in writing of this cl | agent and agree to a and complete perfa ered agent as provic gistered office addr | rmance of my duti led for in Chapter | ies, and I am fa 605, F.S. Or, ij | miliar with and Othis document is |
| | | | | |

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 |
|--------------|-------------------------|----------------------|---------------------|
| MGR | Equity Investor PARTHER | LIC 3853 WATER CREST | <mark>k</mark> □Add |
| | · | LONDRIDO FL 32779 | □Remove |
| | | | ># Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | Change |
| | | | 🗆 🗆 Add |
| | | | □Remove |
| | | | □ Change |
| | | | □Add |
| | | <u> </u> | □Remove |
| | | | □ Change |
| | | | DAdd |
| | | | □Remove |
| | | | □ Change |

| _ | PIFTE CORRECT THE MANGER THE MANGER |
|---------------------|---|
| _ | FRON TOUT PARTIES MUESTORY LLC TO |
| | EQUITA LIVESTOR PARTHETS LLC DUE TO A |
| | SCRWENGES ETOLOR IN THE ORIGINAL FILING |
| _ | 30-20 - 10 - 10 - 10 - 10 - 10 - 10 - 10 |
| _ | |
| _ | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| _ | |
| | |
| _ | |
| | |
| | |
| | |
| ffectiv | e date, if other than the date of filing: |
| 'an effec | tive 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 (if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t |
| | nt's effective date on the Department of State's records. |
| | |
| record d is file | 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 d. |
| | |
| | Niercu 29 2022 |
| Dated _ | |
| Dated _ | |

Filing Fee: \$25.00