

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L21000355115

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(((H23000320932 3)))



H230003209323ABCV

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To:

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

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.
Account Number : I199900000006
Phone : (407)425-7010
Fax Number : (407)425-2747

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Email Address: corporate@zkslawfirm.com

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DIVISION OF CORPORATIONS
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SCARECROW ACQUISITION GROUP, LLC

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T. LEAFUX

SEP 13 2023

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SCARECROW ACQUISITION GROUP, 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:

Lindsay L. Richmond

Name of Person

Zimmerman Kiser Sutcliffe, P.A.

Firm/Company

315 E. Robinson Street, Suite 600

Address

Orlando, FL 32801

City/State and Zip Code

corporate@zkslawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emily Bautista, Corporate Paralegal

407

425-7010

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

(((H23000320932 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SCARECROW ACQUISITION GROUP, 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 8/6/2021 and assigned
Florida document number L21000355115.

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:

2693 W. FAIRBANKS AVE., STE 200

(Principal office address MUST BE A STREET ADDRESS)

WINTER PARK, FL 32789

Enter new mailing address, if applicable:

2693 W. FAIRBANKS AVE., STE 200

(Mailing address MAY BE A POST OFFICE BOX)

WINTER PARK, FL 32789

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:

ZKS Registered Agent Services, LLC

New Registered Office Address:

315 E. Robinson Street, Suite 600

Enter Florida street address

Orlando

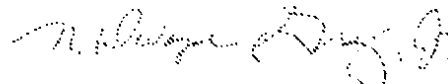
City

Florida 32801

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

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If amending Authorized person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

{{{H123000320932 3}}}

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Esquire Trustee Service, LLC	1919 BLANDING BLVD	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32210	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Sora Capital Partners, LLC	PO BOX 1888	<input checked="" type="checkbox"/> Add
		WINTER PARK, FL 32790	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective 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 (3)(b)

DocuSigned by

www.ck12.org

(61123000320932 3)11

Filing Fee: \$25.00