Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000021582 3)))



H230000215823,49CX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FIRST COAST LAGOON, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T. LL. JUX JAN 19 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIRST COAST LAGOON, LLC (Name of the Limited Liability Compa (A Plorida Limited	noy as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L21000362678	were filed on 08/12/2021 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	121 S. ORANGE AVE.			
(Principal office address MUST BE A STREET ADDRESS)	NORTH TOWER SUITE 1500			
	ORLANDO FLORIDA 32801			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	121 S. ORANGE AVE.			
	NORTH TOWER SUITE 1500			
	ORLANDO PLORIDA 32801			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registe			

Name of New Registered Agent:					
New Registered Office Address:			•	262	
	Enter Fior	ida street address		<u></u>	
		, Florida _		ž	
	City		Zip Code	င္	<u>-</u> -
New Registered Agent's Signature, if changing Registered Agent:			-	-	C

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 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

Title	<u>Name</u>	Address	Type of Action
MGR	NICKOLAS SPRADLIN	18801 N. DALE MABRY HWY	□Add
		\$TE 119	■ Remove
		LUTZ, FL 33548	
			□Add
			Remove
			☐ Change
			©Remove
			Change
			□Remove
	<u> </u>		□Add
			□Remove
			☐ Change
			□Add
			□Remove
			Change

					
			-		
		<u></u>			
···					_
			_	· · · · · · · · · · · · · · · · · · ·	
					
			_		
		·,	 		
			<u> </u>		
					·
		·			
			<u></u>		
			<u> </u>		
		· •			
Effective date, if other the	in the date of fili	ino:		(entia)	· «N
Effective date, if other that is listed, the d	ate must be specific a	and cannot be prior to	o date of filing or mo	re than 90 days after fi	ling.) Pursuant to 605,02
Note: If the date inserted in locument's effective date on	CTT2 DIDCK GESEN TO	CHIEFE GIC ADDITES	ble statutory filing	requirements, this	late will not be listed
	2	, , , , , , , , , , , , , , , , , , , ,			
record specifies a delayed e	ffective date, but n	ot an effective tim	ne, at 12:01 a.m. o	n the earlier of; (b)	The 90th day after t
Oated		2023			
-			- ·		
/					