121 000 387 172

(Re	equestor's Name)	
(Ac	ddress)	
		
(Ad	ddress)	
	·	
(Ci	ty/State/Zip/Phone #	
	☐ WAIT	MAIL
L riort-or	W////	L WALL
(Bu	usiness Entity Name)	·
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instruction - 4-	Elling Officer	
Special Instructions to	Fining Officer:	

Office Use Only

A. RIVERS DEC - 2 2021



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2021 NOY -8 AM 8:11

COVER LETTER

TO: Registration So Division of Cor			• •
SUBJECT: Malla	ard Hill LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jeffrey F. A	Anderson	
		Name of Person	
	Mallard Hill	LLC	
		Firm/Company	
	7913 Malla	rd Hill Drive	
		Address	
	Tallahasse	e, Florida 3230)9
		City/State and Zip Code	
	mallardhill.co@ E-mail address: (gmail.com to be used for future annual report noti	fication)
For further information o	oncerning this matter, please ca	all:	
Jeffrey F.	Anderson	at (850 ₎ 510-4	1658
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	ne following amount:		
☐ \$25.00 Filing Fee ☐ \$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

Mallard Hill LLC			
(<u>Name of the Lim</u>	ited Liability Compa (A Florida Limited	any as it now appears on our Liability Company)	records.)
he Articles of Organization for this Limited I	Liability Company	were filed on 08/30/2	021 and assigned
lorida document number 87-2398817	·		
his amendment is submitted to amend the fol	llowing:		
. If amending name, enter the new name	of the limited liab	oility company here:	
NA			
he new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		NA	
Principal office address MUST BE A STRE	ET ADDRESS)		
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or		NA	onter the name of the new regist
gent and/or the new registered office addre		address on our records,	enter the name of the new regist
Name of New Registered Agent:	NA		202 °E
New Registered Office Address:	NA		- NOV
- The state of the		Enter Florida street	
			Florida 😽 🗩 🕮
	·	City	2 To Zip Code
ew Registered Agent's Signature, if changing	Registered Agent:		8. 1 8. 1
hereby accept the appointment as register rovisions of all statutes relative to the projecept the obligations of my position as regeing filed to merely reflect a change in the ompany has been notified in writing of this	per and complete pistered agent as _l	performance of my duti provided for in Chapter	y. I further agr <mark>ee</mark> to comply with ies, and I am familiar with and 605, F.S. Or, if this 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>		e of Action
AMBR	Jeffrey F. Anderson	7913 Mallard Hill Drive]Add
		Tallahassee, FL 32309	Remove
			lChange
MGR	Kristin E. Anderson	7913 Mallard Hill Drive	ļAdd
		Tallahassee, FL 32309	lRemove
			Change
			lAdd
		0	Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Changa

t II an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an el <u>Note:</u>	ive date, if other than the date of filing:
he reco ord is fi	d 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 led.
Dated	November 02 2021
	Signature of a member or authorized representative of a member
	Jeffrey F. Anderson
	Typed or printed name of signee

Filing Fee: \$25.00