2 1000428066

(Red	questor's Name)	
(Add	lress)	
(Add	dress)	
(City	//State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	. Certificates	s of Status
Special Instructions to F	Filing Officer:	





400373132244

10/05/21--01015--016 **25.00

ALLAHASSEE, FLL.

OCT 0 # 7021 LALBRITTON

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Citrus Ridge Stora	age, LLC		
		-	
			
· 			_
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
			Vehicle Search
	 		Driving Record
Requested by:			UCC 1 or 3 File
Name	Date	Time	UCC 11 Search
	~ uiv		UCC 11 Retrieval
Walk-In	Will Pick	Up	Courier

COVER LETTER

	Registration S Division of Co			
SUBJEC	Cirtus Rid	ge Storage, LLC		
	···	Name of Lir	nited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please ret	um all comespo	ondence concerning this matter	to the following:	
		Mark G. Turner, Esq.		
			Name of Person	
	•	Straughn & Turner, PA		of Person Company Iddress and Zip Code future annual report notification) 363 293-1184 rea Code Daytime Telephone Number Diling Fee & Gied Copy Certificate of Status & Certificate of Status &
			Firm/Company	
		255 Magnolia Ave., SW		
		· · · · · · · · · · · · · · · · · · ·	Address	
		Cirtus Ridge Storage, LLC Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: Mark G. Turner, Esq.		
			City/State and Zip Code	_
			-	cation)
For further	r information o	oncerning this matter, please c	all:	
Bonnie H	olly-Brown			
	Name of	f Person		Telephone Number
Enclosed i	s a check for th	e following amount:		
□ \$ 25. 0 0	Filing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

Cirtus Ridge Storage, LLC	1/2
(Name of the Limited Liability C (A Florida Lir	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com	
Florida document number L21000428066	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
Citrus Ridge Storage, LLC	
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:	
(Principal office address MUST BE A STREET ADDRES	SS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
R If amonding the projectional access and to	
registered agent and/or the new registered office address	ed office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Ag	zent:

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

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 = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			Add
			□ Remove
			Change
			
			□ Remove
			Change
			
			Remove
			□ Change
			□ Remove
			Add
			□ Remove
			Character 1

					
<u> </u>					
			- 	_ _	
			· · · · · · · · · · · · · · · · · · ·		
	 -			T	
-		-		 	
					
				<u>.</u>	
			- , , , , , , , , , , , , , , , , , , ,		
					
					
Effective date, if other than the office of the date must Note: If the date inserted in this blo document's effective date on the De	ek does not nicet inc	applicable statu	tory illing reguiren	ients. This date will no	nt to 605.0207 (t be listed as t
ne record specifies a delayed The 90th day after the reco	effective date, bord is filed.	out not an eff	ective time, at	12:01 a.m. on the	e earlier of:
Dated October 5	2021	<u> </u>			
15/m	10 C -				
/s/m	file G. 11	or authorized con-	esentative of a memb	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	

Page 3 of 3

Filing Fee: \$25.00