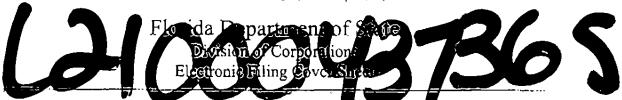
1/25/22, 11:08 AM

Division of Corporations



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(((H22000031962 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GASSMAN, CROTTY & DENICOLO, P.A.

Account Number : 075350000514 Phone : (727)442-1200 Fax Number : (727)443-5829

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

TFH - FOREST LAKES 2021, L.L.C.

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

T. LEMIEUX

JAN 26 2022

Electronic Filing Menu Corporate Filing Menu

Help

Fax Audit # H220000319623 -

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TFH - FOREST LAKES 2021, L.L.C.
(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 September 27, 2021 and assigned
Florida document number 1/21000437365
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
BOCCE CT., L.L.C.
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
ENAMENT MATERIAL OF OFFICE ROAT
B. If amending the registered agent and/or registered office address on our records, enter the name of the new register
agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florido sue et address
Florida T
City 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

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
		· · · · · · · · · · · · · · · · · · ·	Romove
			GChange
			Remove
			□Rcmove
			Change
			DAdd
			🗆 Rcmove
			□Change
			□Add
			[]Remove
			□ Change
			⊡Add
			☐ Change

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary)
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Note: If	e date, if other than the date of filing:
he record : ord is filed	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 l.
Dated	January 25, 2022
	Signature of a member or authorized representative of a member
	CHRISTOPHER J. DENICOLO, ESQ.
	Typed or printed name of signer

Filing Fee: \$25.00