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2021 NOV -2 AM 9: 2 SECRET/ SV 36 3 TH

COVER LETTER

FO: Registration Section Division of Corpo		-	
SUBJECT: 500	COL GOLL CO Name of Limit	WS. LLC	
	() Name of Limit	ted Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are subn	nitted for filing.	
Please return all correspond	lence concerning this matter t	to the following:	
	alijan	Name of Person	
		Firm/Company	
	26.59 SE	151 Lane Address	
		City/State and Zip Code	
	E-mail address: (to	o be used for future annual report notific	cation)
For further information con	cerning this matter, please ca	II:	
Alejando Name of P	erson Cax (LQ	at (<u>780</u>) <u>488 · 50</u> Area Code Daytime	5 84 Telephone Number
Enclosed is a check for the	following amount:		
図 \$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 Se		Street Address: Registration Sect	
Division of Cor	rporations	Division of Corp	Otations

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

FILED

Zip Code

Sough Golf Cars. (Name of the Limited Hiability Compar	2021 NOV -2 AH 9: 27 LLO LY as it now appears on our records. TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TALL TAL
(A Florida Limited L	iability Company) IALL AND STATE
The Articles of Organization for this Limited Liability Company	were filed on 1026/2021 and assigned
Florida document number <u>L 210004(o 4813</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Saziale Golf Cox 45, LL The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	~/A
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	n /A.
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new reg</u> istered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
	. 1 17/1 1/44

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.

City

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	
AMRR =	Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□ Remove
			Change
			□ Remove
			☐ Change
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Effective date, if other than the date of filing: D		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. e record 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 rd is filed. Dated On John 28th , 2021 Signature of a member or authorized representative of a member		
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Dated <u>On Jobey 28th</u> , <u>3031</u> Signature of a member or authorized representative of a member	Note:	ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
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