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	(Address)	
	(City/State/Zip/Phone #)	
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	(Business Entity Name)	
	(Document Number)	
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3458 lakesore Drive Tallahassee, FL 32312

07/14/2025

D	ate:	07/14/2025	- 4:1 DW
		Acc#I20160000072	- 4: () - W
Name:	Bayside Pe	et Resort at WP, LLC	
Document #:			
Order #:	16428609		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified Plain: COGS:		Email Address for Annual Report Notifications:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount	\$ 55.00	

Thank you!

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:		Resort at WP, LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Robert L. Huff		
			Name of Person	
			Firm/Company	
		5311 Hidden Harbor Rd.		
			Address	
		Sarasota, FL 34242		
			City/State and Zip Code	
		robert@hulfprop.com		
		E-mail address: (to be used for future annual report no	otification)
For further in	nformation c	oncerning this matter, please ca	all:	
Robert L. H	uff		937 304-7913	<u>.</u> .
	Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed is a	a check for th	ne following amount:		
□ \$25.00 I	Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

2025 JUL 14 PH 3: 58

This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company BLH4, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the 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)	November 17, 2021 here: e designation "LLC" or t	he abbreviation "L.L.C."
A. If amending name, enter the new name of the limited liability company BLH4, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the 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)	here: e designation "LLC" or d	he abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	e designation "LEC" or t	
BLH4, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the 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)	e designation "LEC" or t	
The new name must be distinguishable and contain the words "Limited Liability Company," the 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)		
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(Mailing address MAY BE A POST OFFICE BOX)		
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B. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here:	r records, <u>enter the</u> i	name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
Enter .	lorida street address	
	, Florida	9
City		Zip Code

Thereby 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			Remove
			□Change
			□Add
			□Remove
			☐Change
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
		-1	□ Change
			□Add
			□Remove
			□Change
			□Add
			[]Remove
			□ Channe

D. If amending any other inforn	nation, enter change(s) here	e: (Attach additional she	ets, if necessary.)	
				
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	4-1-7			
E. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	nust be specific and cannot be prior block does not meet the applic	able statutory filing requir-	(optional) 90 days after filing.) Pursuant to 605.02 ements, this date will not be listed	207 (3)(as the
f the record specifies a delayed effectecord is filed.	ive date, but not an effective ti	me, at 12:01 a.m. on the ea	arlier of: (b) The 90th day after t	he
Dated	. 2025			
Robert Huff				
	Signature of a member or author	orized representative of a mer	nber	
Robert L. Huff	<u>. </u>			
	Typed or print	ed name of signee		

Filing Fee: \$25.00