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A. BUTLER

JAN - 7 2022

COVER LETTER

TO:	Registration S Division of Co						
CHD 107		Creek Ranch LLC					
SUBJEC		Name of Lim	ited Liability Company				
The encl	osed Articles o	f Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn all corresp	condence concerning this matter	to the following:				
		Stephen Levine					
			Name of Person				
			Firm/Company				
		2273 Phoenix Ave					
			Address				
		Davie, FL 33324					
City/State and Zip Code stevelevine1h@gmail.com							
		E-mail address: (to be used for future annual report noti	fication)			
For furth	ner information	concerning this matter, please co	all:				
Stephen			954 536-5491 at ()				
	Name	of Person	Area Code Daytim	e Telephone Number			
_		the following amount:					
र्छ \$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 Addro Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee e Street, Suite 810			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 677 70 1111 5- 00 Winding Creek Ranch LLC (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 $\frac{12/10/2021}{}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	THOMAS ESCH	140 E HILO STREET NAPLES, FL 34113	□Add
			NRemove
			□ Change
AMBR	CIRCLE E RANCH LLC	140 E HILO STREET NAPLES, FL 34113	DPAdd
			□Remove
			□Change
			□Add
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an effective date lote: If the date	, it other than e is listed, the dat te inserted in the ective date on t	te must be speci his block does	ific and cannot not meet t	ot be prior to the applical	odate of filin	g or more than	90 days after	r filing.) Purs	mant to 605.020 not be listed a
record specific l is filed.	es a delayed efi	fective date, b	ut not an ei	ffective tim	ie, at 12:01	a.m. on the	earlier of: (t	o) The 901	h day after the
DECEM	BER 16)21					
		1	12						
		Signatur	e of a memb	our or author	ized represed	ntative of a mo	mber		

Filing Fee: \$25.00