

L220000002761

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LLC N/C Amend

09/20/22--01011--012 \*\*25.00

A. RAMSEY

SEP 21 2022

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September 20, 2022

Department of State  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**HAND DELIVERY**

SUBJECT: ***Fort Knox TLH 27 North, LLC.***  
a Florida limited liability company

Dear Secretary of State:

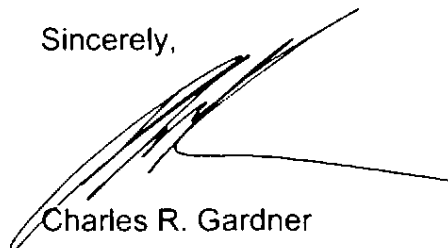
Enclosed are the following:

1. An original and one (1) copy of the *Articles of Amendment* (changing the name to ***Fort Knox TLH 27 North, LLC***) for the above-identified Florida limited liability company; and
2. A check for \$25.00 made payable to the Florida Department of State for the filing fee.

My name and contact information for questions, comments, and copies are as follows:

Charles R. Gardner  
Gardner, Bist, Bowden, Dee, /  
LaVia, Wright, Perry & Harper, P.A.  
1300 Thomaswood Drive  
Tallahassee, Florida 32308  
Telephone No.: (850) 385-0070  
Email Address: [charles@gbwlegal.com](mailto:charles@gbwlegal.com)

Sincerely,



Charles R. Gardner

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

FORT KNOW TLH 27 NORTH, LLC

2022 SEP 20 PM 12 14

\_\_\_\_\_  
(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 12/23/2021 and assigned  
Florida document number L22000002761.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

FORT KNOX TLH 27 NORTH, 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 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*

\_\_\_\_\_, **Florida**

\_\_\_\_\_  
*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**

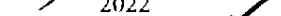


[illegible]

(If an effective 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 (3)(b)

If the 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 record is filed.

~~DATE~~ September 20, 2022



\_\_\_\_\_  
Signature of a member or authorized representative of a member

Typed or printed name of signee