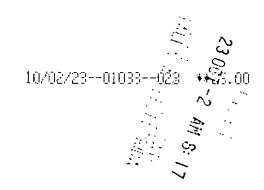
L22000052296

(Requestor's Name)
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(Sity) State/Zipi Hone ny
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer.
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J. HORNE
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J. HORNE OCT 14 Zu.

Office Use Only



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COVER LETTER

Registration Section
Division of Corporations

TO:

428 WATE	ERSHED, LLC		
30BJEC1	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	William A. Dooley		
		Name of Person	
	Willima A. Dooley, P.A.		
		Firm/Company	
	2042 Bee Ridge Road		
		Address	
	Sarasota FL 34239		
		City/State and Zip Code	
	mike@casksrq.com		
	E-mail address: (to be used for future annual report noti-	fication)
For further information of	concerning this matter, please c	all:	
William A. Dooley		941 556.7200 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 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)
Mailing Address Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroo Tallahassee, FL	porations Callahassee e Street, Suite 810

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

428 WATERSHED, LLC

23 107, 72 11, 18, 19, 11 (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	y were filed on <u>01/31/202</u>	2 and assigned
Florida document number L22000052296		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation	on "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 agent and/or the new registered office address here:	address on our records	, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida stree	
		, Florida Zip Code
		Zip Code
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent and ag-	ree to act in this capaci	ty. 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>	Address	Type of Action
AMBR	DJ Swamp VII Properties, LLC	5001 Lakewood Ranch Blvd	□Add
		Sarasota FL 34240	■Remove
			Change
AMBR	Frank and Frances LaCivita	5001 Lakewood Ranch Blvd	
		Sarasota FL 34240	□Remove
AMBR	Sessions Family Holdings, LLC	5001 Lakewood Ranch Blvd	■Add
		Sarasota FL 34240	□Remove
			Change
			□ Add
			□Remove
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lf an eff Note:	(optional) lective date, if other than the date of filing:
e recor	d 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 led.
	2023
Dated	
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member

Filing Fee: \$25.00