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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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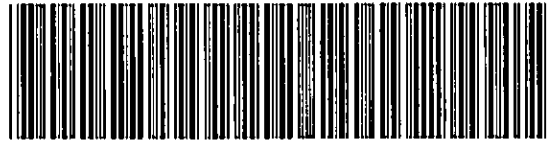
(Business Entity Name)

(Document Number)

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2022 FEB 17 PM 12:43

SECRETARY OF STATE
TALLAHASSEE, FL

D. BRUCE
FEB 25 2022



David, Wierenga & Lauka, PC

ATTORNEYS AT LAW

Ronald E. David
James R. Wierenga
Jeshua T. Lauka

99 Monroe Ave, NW Ste. 1210
Grand Rapids, MI 49503
tel. 616.454.3883
dwlawpc.com

January 31, 2022

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Epic Turf North Florida, LLC

Dear Sir/Madam:

Enclosed, please see *Articles of Amendment to Articles of Organization* with regard to Epic Turf North Florida, LLC along with a check in the amount of \$25 representing the filing fee.

If you have any comments or questions with regard to this letter or the enclosures, please contact me. I look forward to hearing from you.

Cordially,

DAVID, WIERENGA & LAUKA, P.C.

Jeshua T. Lauka

JTL/lr
Enclosures

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Epic Turf North Florida, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeshua T. Lauka

Name of Person

David, Wierenga & Lauka, PC

Firm/Company

99 Monroe Ave., NW, Suite 1210

Address

Grand Rapids, MI 49503

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeshua T. Lauka

616

454-3883

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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 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

STATE OF FLORIDA
TALLAHASSEE, FL

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

Epic Turf North Florida, 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 1/31/22 and assigned
Florida document number L22000052482.

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)

1015 Atlantic Blvd., Suite 171

Atlantic Beach, FL 32233

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1015 Atlantic Blvd., Suite 171

Atlantic Beach, FL 32233

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

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TALLAHASSEE, FL
SECRETARY OF STATE

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>	<u>Type of Action</u>
AMBR	Jean-Pierre Valdez	1015 Atlantic Blvd., Suite 171	<input checked="" type="checkbox"/> Add
		Atlantic Beach, FL 32233	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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2022 FEB 17 PM 12:44
STORTELLO, DAVE
TALLAHASSEE, FL

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(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.

Dated February 11th, 2022

Signature of a member or authorized representative of a member

Jeshua T. Lauka

Typed or printed name of signee