$L_{22}000$	060154
(Requestor's Name) (Address) (Address)	300434623623
(City/State/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	08/13/2401043001 ** 25.00
Special Instructions to Filing Officer.	2024 819 13 PM 4: 46

COVER LETTER

TO: Registration Section Division of Corporations

Pathways Properties Two, LLC

.

SUBJECT: _

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:

David P Wagner

Name of Person

Pathways Properties Two, LLC

Firm/Company

PO Box 491500

Address

Leesburg, FL 34749-1500

City/State and Zip Code

dwagner@pathwayshp.com

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

For further information concerning this matter, please call:

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) S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> 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

Pathways Properties Two, 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 <u>02/04/2022</u> and assigned Florida document number <u>L22000060684</u>.....

This amendment is submitted to amend the following:

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

1031 WEST MAGNOLIA, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

	£*
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	
	6 t-

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	ldress
		, 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□Change
		- <u>-</u> ,	🗆 Add
			□Change
			DbA 🗆
			🗆 Remove
			Change
			□Add
	. <u> </u>		
	<u></u>	Change	
		🗆 Add	
			🗆 Add
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

· · · ·		
	···· ··· ··· ··· ··· ··· ··· ··· ··· ·	
	- · ·	
		<u> </u>
········		
		

E. Effective date, if other than the date of filing: ______ (optional) (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

nted August 8		
	Signature of a member or authorized representative of a member	
David P Wagner		
· <u> </u>	Typed or printed name of signee	