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Comple of

COVER LETTER

TO: Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations

SUBJECT: <u>Cele</u>	stial Land	Management ited Liability Company	UC
	Amendment and fee(s) are sub-	<u>-</u>	
	David R.	Napleracz Name of Person	
		and Must. CCC	<u></u>
		Firm/Company	
	1215 ORTO	N STREET Address	
	Jacksonville	City/State and Zip Code	5
		management (10 Pa	
For further information co	oncerning this matter, please ca	all:	
David R. Na Name of	Person	at (904) 431 Area Code Daytim	- 9586 e Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	ation
Registration S Division of C		Registration Sec Division of Cor	

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

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

Celestial Land	d Mana	wement LLC	2022 MAY 16 AH 7: 46
(Name of the Limited	Liability Compar A Florida Limited L	ye munt LLC ay as it now appears on our records.) iability Company)	7.1.
The Articles of Organization for this Limited Lial		were filed on <u>2-18-203</u>	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	the limited liabi	lity company here:	
N/A The new name must be distinguishable and contain the work			
The new name must be distinguishable and contain the wor	rds "Limited Liabili	ity Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicat	bie:	NA	
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	NA	
B. If amending the registered agent and/or reagent and/or the new registered office address	gistered office a <u>here</u> :	eddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	NIA		
New Registered Office Address:		Enter Florida street address	
		, Florid	a
		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.

10/4	
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>	Name	Address	Type of Action
Mgr	David Ross Nopieracz	1215 Orton Street	
		Jacksonville, Fla 32205	□Remove
			□Change
Ambr	Dould Ross Nopieroez	1215 Octon Street	ØAdd
		Jacksonville, fla 32205	□Remove
			Change
			□Adđ
			□Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			Петоvе
			Change

	ing any other information, enter change(s) here: (Attach additional sheets, if nece	
		
fective	e date, if other than the date of filing: 2-18-2022 (opt ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after	ional) er filing.) Pursuant to 605.
ote: If	the date inserted in this block does not meet the applicable statutory tiling requirements, the	is date will not be liste
cument	t's effective date on the Department of State's records.	
	in the second of	h) The O0th day after
ecord s is filed.	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (o) The sources and
ited	May 12, 2002.	
	- Julia Capital	
	Signature of a member or authorized representance of a member	