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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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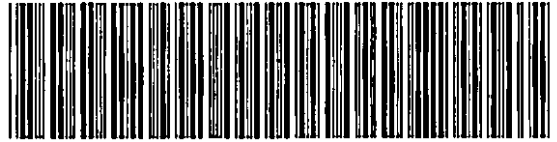
(Business Entity Name)

(Document Number)

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2022 MAR 21 PM 1:39

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER
APR 04 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: West Melbourne Business Center, 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:

George Kelly
Name of Person

GPK LLC
Firm/Company

1935 Commerce Lane # 5
Address

Jupiter, FL 33458
City/State and Zip Code

GTKellyGC@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

George Kelly at (561) 743-7381
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

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

FILED

West Melbourne Business Center 2022 MAR 21 PM 1:39
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 2/14/22 and assigned
Florida document number L22000092748.

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) _____

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

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>
<u>MGR</u>	<u>Range Road Developers</u>	<u>2401 PGA Blvd Suite 260</u>	<input type="checkbox"/> Add
		<u>Palm Beach Gardens FL 33410</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>MGR</u>	<u>Michael Canter</u>	<u>2401 PGA Blvd Suite 260</u>	<input checked="" type="checkbox"/> Add
		<u>Palm Beach Gardens, FL 33410</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>MGR</u>	<u>Old Florida Family Inc</u>	<u>8144 Okeechobee Blvd Bldg B</u>	<input type="checkbox"/> Add
		<u>West Palm Beach FL 33411</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>MGR</u>	<u>Old Florida Family Inc</u>	<u>8144 Okeechobee Blvd Suite B</u>	<input checked="" type="checkbox"/> Add
		<u>West Palm Beach FL 33411</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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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 March 10, 2022

Signature of a member or authorized representative of a member

Patrick B. Kelly
Typed or printed name of signee

Filing Fee: \$25.00