L22000118172

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:		stration Sec sion of Corp			
CUDIE		Removal of	AMBR and Registered Agent		
SUBJE	CI;		Name of Lim	ited Liability Company	
The enc	losed	Articles of A	Amendment and fee(s) are sub	emitted for filing.	
Please r	eturn	all correspon	dence concerning this matter	to the following:	
			Brandon Barber		
				Name of Person	
			The Ark FT LLC		
				Firm/Company	
			123 Crystal Lane		
				Address	
			Crawfordville, FL 32327		
				City/State and Zip Code	
			Thearkft@gmail.com	to be used for future annual report notification)	
For furt	her in	formation co	oncerning this matter, please c		-
Brando	n Barl	ber Bun	den Bahr	850 509-0476	Carlos S
	_	Name of	Person	Area Code Daytime Telephone Number	5 1 1 1 2 2 2 2
Enclose	ed is a	check for the	e following amount:	3: 23 FL	Vagyo [†]
■ \$25	5,00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) 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

The Ark F1, LLC								
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)						
The Articles of Organization for this Limited I	Liability Company were filed on 1	March 14, 2022	_ and assigned					
Florida document number L22000118172								
his amendment is submitted to amend the fol	lowing:							
a. If amending name, enter the new name o	of the limited liability company	here:						
he new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbre	viation "L.L.C."					
inter new principal offices address, if appli	cable:	77	150					
Principal office address MUST BE A STRE	ET ADDRESS)		023					
		r r	<u> </u>					
			2					
nter new mailing address, if applicable:		<u> </u>						
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	<u> </u>	ت ا					
		- A	22					
		,	, <u> </u>					
 If amending the registered agent and/or gent and/or the new registered office addre 	•	records, enter the name of	f the new regist					
Name of New Registered Agent:	Brandon Barber							
New Registered Office Address:	123 Crystal Lane							
	Enter F	lorida street address						
	Crawfordville	, Florida ³²³²⁷	! 					
	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>	Address	Type of Action
AMBR	Joni Read	16069 NW Lakeside Lane	
		Bristol, FL 32321	■Remove
			Change
<u>_</u>	 		□ Add
			□Remove
			Change
			□Add
			Change Padd
			S & SAI Control Contro
			□ Change
			
			□Remove
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		February 13, 2022	(antional)	
Note: 1	re date, if other than the date	February 13, 2022 pecific and cannot be prior to date of filing or moles not meet the applicable statutory filing	(optional) ore than 90 days after filing.) Pursuant to 605.02 g requirements, this date will not be listed	207 (i as tl
Note: If document the reco	re date, if other than the date tive date is listed, the date must be s f the date inserted in this block of this effective date on the Depart	February 13, 2022 e of filing: pecific and cannot be prior to date of filing or moles not meet the applicable statutory filingment of State's records. ective date, but not an effective ti	requirements, this date will not be listed	as tl
Note: I document the reco	re date, if other than the date trive date is listed, the date must be so the date inserted in this block dont's effective date on the Depart ord specifies a delayed effecth day after the record	February 13, 2022 e of filing: pecific and cannot be prior to date of filing or moles not meet the applicable statutory filingment of State's records. ective date, but not an effective ti	requirements, this date will not be listed	as tl
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Filing Fee: \$25.00