122000120387

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200387600942

www.roved==01821==809 ***25.00



Ja

COVER LETTER

	gistration Se vision of Cor			•
SUBJECT	Bardes Ran	ch, LLC		
306.71.61	•	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub- ndence concerning this matter	-	
		Stephanie Goebel		
		7 a Davin In .	Name of Person	<u> </u>
		ZenBusiness Inc.	Firm/Company	
		5511 Parkerest Drive, Ste.	• •	
		Austin, TX 78731	Address	
		fulfillment@zenbusiness.co	City/State and Zip Code	
For further	information co	E-mail address: () Oncerning this matter, please ca	to be used for future annual report notif	leation)
		nBusiness Inc.	844 493-6249	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is	a check for th	e 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

s on our records.)
09/2022 and assigned
<u>re</u> :
esignation "LLC" or the abbreviation "L.L.C."
1.3
<u> </u>
4
our records, enter the name of the
ida street address
ida street address Florida
/(

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>	Name	Address	Type of Action
			□ Add
			□ Remove
			Change
			□ Remove
			Change
			Add Add Remove
			ා ල Change
			□ Remove
			Change
	71		□ Add
			☐ Remove
			Change
			Add
			Remove
			□ Change

	. <u> </u>			
				99999
				P 35
	-			- 5
	<u> </u>			
			-	
ctive date, if other than th	e date of filing:	<u> </u>	(optic	nal)
effective date is listed, the date me e: If the date inserted in this b	ust be specific and cannot be prio block does not meet the appli	r to date of filing or mo cable statutory filing	re than 90 days after , requirements, this	filing.) Pursuant to 605.6 date will not be listed
ument's effective date on the I	Department of State's records	i.		
ecord specifies a delaye	nd affactive data, but no	at an offoctive ti	ma at 12:01 a	m on the earlie
ne 90th day after the re		or an enective to	me, at 12.01 a	.m. on the earne
ed April 30	2022			
/s/ CHASE BARDES	<u> </u>			
	Signature of a member or auth	iorized representative (of a member	

Page 3 of 3

Filing Fee: \$25.00