

Electronic Filing Menu Corporate Filing Menu

Help

S. ROBERTS

JUL 1 2 2023

٩,		2023-07-11 18:30:24 GM	IT 1718304	1175	From: Alexander Eng
۲.		(((H230002429	713))) AMENDMENT		
		۰ ۱	Ö		
		ARTICLES OF (ORGANIZATION		•
	•	C)F	4	,
R	ockledge fl holdc	0 LLC			
	(Name of th	e Limited Liability Comp (A Florida Limited	nny as it now appears on our r Liability Company)	ecords.)	······································
The Articles of C	Diganization for this Lin	nited Liability Company	were filed on		_ and assigned
	t number <u>L22000121893</u>				
	is submitted to amend th				
this amenument	is submitted to atticite u	ne tonowing:			
A. If amending	name, enter the new m	ame of the limited liab	<u>ility company here</u> :		
				······	
The new name must	be distinguishable and conta	in the words "Limited Liabi	lity Company," the designation		viation "L.L.C."
Enter new princ	ipal offices address, if	applicable:	615 Crescent Executive C	· · · · · · · · · · · · · · · · · · ·	2123
<u>(Principal office</u>	address MUST BEAS	<u>TREET ADDRESS)</u>	Lake Mary, Florida 32746		13
					<u> </u>
Enter new maili	ng address, if applicab	le:	615 Crescent Executive C	ourt, Suite 100	-0
(Mailing address	MAY BE A POST OF	FICE BOX)	Lake Mary, Florida 32746	; 	
					~

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

17183041175

(((H23000242971 3))) If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
			🗆 Add
			🗆 Remove
			DChange
			🗆 Add
			[]Change
<u> </u>			🖸 Add
			DRemove
		<u></u>	🖸 Change
	<u> </u>		CAdd
			🗆 Remove
			🗆 Change
	<u> </u>		🗆 Add
			ORemove
			Change
			🗆 Add
			🗆 Remove
			Change

(((H230002429713)))

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

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<u> </u>	
·····	
Note: If the date inserted	than the date of filing:(optional) e date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(i in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
the record specifies a delayed	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ПН У АТЫ	2025
Dated	
	Signature of a member or authorized representative of a member
	Robert Schoenfeld
	KODER SUBJECTE

Typed or printed name of signce

Filing Fee: \$25.00 (((H23000242971 3)))