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Special Instructions to	Filing Officer:	

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Aug 11 2022

COVER LETTER

	istration Se ision of Cor						
	BIG BUCK	CET DEV-FORT MYERS, LL	С				
SUBJECT:		Name of Lim	ited Liability Company				
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return	all correspo	ondence concerning this matter	to the following:				
		DAVID COBB					
			Name of Person		\$50°	NOT 2202	
			Firm/Company	<u>_</u>	5.1		
		100 E CENTRAL BLVD.	SUITE 2			: :<	
			Address		: `	\$ \$	
		ORLANDO, FL 32801					
		BRIAN@ARCHONCA.CO	City/State and Zip Code DM				
For forther in	oformation a	E-mail address: (oncerning this matter, please c	to be used for future annual report not	fication)			
DAVID CO		oncerning this matter, prease c	407 833-0844				
	Name o	f Person	at () Area Code Daytin	e Telephone Number			
Enclosed is a	check for th	ne following amount:					
■ \$ 25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filir Certificate Certified C (additional co	of State opy		
	ling Addres		<u>Street Address:</u> Registration Se	ction			
Div	ision of C	orporations	Division of Cor	porations			
). Box 632 Iahassee, I		The Centre of T 2415 N. Monro	attanassee e Street, Suite 810)		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIG BUCKET DEV-FORT MYERS, LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	ow appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were file	ed on 03/11/2022 and assigned
Florida document number L.22000124851	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	2007 7- SEE
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	₹ 2 × 2 × 3 × 3 × 3 × 3 × 3 × 3 × 3 × 3 ×
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	on our records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida 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.

Cuy

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	DAVID COBB	100 E CENTRAL BLVD SUITE 2	
		ORLANDO, FL 32801	Remove
MGR	DAVID COBB	100 E CENTRAL BLVD SUITE 2	= Add
		ORLANDO, FL 32801	Remove
		<u>. </u>	□Change
MGR	WADE ONEY	4750 THE GROVE ST STE 290	🗐 Add
		WINDERMERE, FL 34786	□Remove
		 	□Change
			DAdd
			\ Remove
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	DAVID COBB			

Filing Fee: \$25.00