## 2000/45566

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	· #)
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A. RIVERS APR 2 5 2023

## **COVER LETTER**

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CUB IE		ldings, LLC		
SUBJECT	.:	Name of Lin	nited Liability Company	<del></del>
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	ım all correspo	ondence concerning this matter	to the following:	
		Linda Walsh		
			Name of Person	
			Firm/Company	
		16 Riker Ave	Name of Person  Firm/Company  Address  City/State and Zip Code tgrp.com  (to be used for future annual report notification)	
			Address	
		Santa Rosa Beach, FL 324	359	
			•	
		linda@walshdevelopmentg		
For further	r information c	oncerning this matter, please o	•	outication)
Linda Wa	lsh			
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed i	s a check for th	ne following amount:		
<b>■ \$</b> 25.00	) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	failing Addres			ection
E	Division of C	orporations	Division of Co	orporations
	O. Box 632			
1	'allahassee, l	TL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sundae Holdings, LLC		
(Name of the Limited Li- (A Fl	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabili	ty Company were filed on 03/29/2022	and assigned
Florida document number L.22000145566	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
Falcon Ridge Townhomes, LLC		
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 AL	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or regist agent and/or the new registered office address here.		FEB T
Name of New Registered Agent:		ASSE
New Registered Office Address:		THE C
	Enter Florida street address	8: 08 20:08 30:08
	, Florida,	Zip Code
	City	гір Соае

## 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
		<del></del>	□ Add
			□ Remove
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			□Remove
			Change
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ffective date, if other than the d	late of filing:		(optional)	
an effective date is listed, the date must l	be specific and cannot be prior to	date of filing or more than	90 days after filing.) Pursu	ant to 605.0207
ocument's effective date on the Dep	ck does not meet the applical partment of State's records.	statutory filing requi	rements, this date will n	ot be listed as
	date, but not an effective tim	ie, at 12:01 a.m. on the	earlier of: (b) The 90th	day after the
l is filed.	2023			
l is filed.  February 21  ated		<u>-</u> ·		
l is filed.  February 21  ated		_·		
record specifies a delayed effective is filed.  The specifies a delayed effective is filed.  The specifies a delayed effective is filed.		ized representative of a mo	ember	
l is filed.  February 21  ated	2023  Signature of a member or author	zed representative of a mo	ember	

Filing Fee: \$25.00