L22000158267

(Requestor's Name)
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PICK-UP WAIT MAIL
(D)
(Business Entity Name)
(Document Number)
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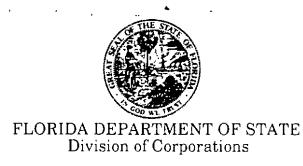


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October 9, 2023

MARINA PARKS 9536 NAVARRE PARKWAY NAVARRE, FL 32566

SUBJECT: EL PASO OF CRESTVIEW LLC

Ref. Number: L22000158267

We have received your document for EL PASO OF CRESTVIEW LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call-(850) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 923A00023353

101 21 2023

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

EL PASO OF CRESTVIEW LLC			
(Name of the Lim	ted Liability Company a (A Florida Limited Liabi	s it now appears on our record lity Company)	<u>s.</u>)
ne Articles of Organization for this Limited I orida document number L22000158267		re filed on 04/01/2022	and assigned
is amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name o	of the limited liability	company here:	
e new name must be distinguishable and contain the	words "Limited Liability C	Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:		
rincipal office address MUST BE A STRE	<u>ET ADDRESS)</u>	. <u></u>	<u></u> _
	<u>.</u>	<u> </u>	
nter new mailing address, if applicable:			
Agiling address MAY BE A POST OFFICE	EBOX)		
	_		
. If amending the registered agent and/or		ress on our records, <u>enter</u>	the name of the new regist
ent and/or the new registered office addr	<u>ess here</u> :		
	MARDIA BARKO		
Name of New Registered Agent:	MARINA PARKS		
New Registered Office Address:	9536 NAVARRE F		
New Registered Office Pladicio.		Enter Florida street addres	<u> </u>
	NAVARRE	FI	lorida 32566 Ci
		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.

City

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
MGR	JUDY CAPELLAN	175 MAIN STREET #1388	= Add
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cument's effective date on the Department	artment of State's rec	ords.			
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	ROGELIO MAYEZ (Oct 23, 20.	23 11.73 CD17			_