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FALLAHASSEE, FLORIDA

AUG 2 2 2022

S. PRATHER

COVER LETTER

TO:

TO: Registration S Division of Co			
	Goose Rd LLC		•
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Forrest Cobb		
		Name of Person	
		Firm/Company	
	3654 NW 82nd Drive	Address	
	Pembroke Pines, FL 3302	Address	
	heath@heathcobbinc.com	City/State and Zip Code	
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report noti	fication)
Forrest Cobb		352 302-8477 at ()	
Name	of Person		e Telephone Number
Enclosed is a check for	the 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 Addr Registration Division of P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

0 Canada Goose Rd LLC			2 JUI
(Name of the Limits	ed Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	FILED W-7 PH
The Articles of Organization for this Limited Li Florida document number L22000229954			PH CO PHO
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
Lot 18 Canada Goose LLC			
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designation "LLC" or the ab	bbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3654 NW 82nd Dr	
		Pembroke Pines, FL 33024	
		3654 NW 82nd Dr Pembroke Pines, FL 33024	
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, enter the nan	ne of the new registered
Name of New Registered Agent:	Forrest Cobb		
New Registered Office Address:	3654 NW 82nd	Dr Enter Florida street address	
	Pembroke Pine		3024

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

Zip Code

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

Title	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
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ffective date, if other than the of an effective date is listed, the date must lote: If the date inserted in this blo ocument's effective date on the De	be specific and cannot book does not meet the	applicable statutor	g or more than 90 da y filing requiremer	(optional) ys after filing.) Pr nts, this date wi	ursuant to 60 11 not be lis	95.0207 sted as
	date, but not an effec	ctive time, at 12:01	a.m. on the earlier	r of: (b) The 9	Oth day aft	er 2022
					F	ـــ
is filed.	. 2022	<u> </u>	,		AHASSEE	2022 JUN -7 F
record specifies a delayed effective I is filed. June 4	2022 Signature of a member of	I III	ntative of a member		AHASSEE, FL	JUN -7 PM 6: 21

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