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PICK-UP WAIT MAIL	
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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:		AT PENSACOLA, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	ı all correspo	endence concerning this matter	to the following:	
		J. Lindsay Builder, Jr., Esq		
			Name of Person	
		Page Scrantom Sprouse Tu	cker & Ford, P.C.	
			Firm/Company	
		398 West Morse Blvd., Su	ite 200	
			Address	
		Winter Park, FL 32789		
			City/State and Zip Code	·- · · · · · · · · · · · · · · · · · ·
		amilner@trimcor.com		
		E-mail address: (to be used for future annual report not	ification)
For further i	nformation c	oncerning this matter, please ca	all:	
Vanda Mitc	hell		321 304-6031	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is	a check for tl	ne following amount:		
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		<u>Street Address:</u> Registration Se	ection
	gistration ! vision of C	Section Corporations	Division of Co	
	D. Box 632	•	The Centre of	
	Hahassee,		2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILEI)

RETREAT AT PENSACOLA, LLC

company has been notified in writing of this change.

2022 JUN 27 PM 12 53

e filed on June 7, 2022	
e nied on	and assigned
company here:	
ompany," the designation "LI	.C" or the abbreviation "L.L.C."
ess on our records, <u>ente</u>	er the name of the new regis
	<u> </u>
Enter Florida street addr	ess
, FloridaZip Cod	
City	zap Couc
	ress on our records, <u>ento</u> Enter Florida street addi

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

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	Steven W. Corbett	PO Box 518	\ _Add
		Phenix City AL 36868	=Remove
		<u></u>	Change
MGR	JUSTON TRIMBACK	PO Box 518	Add
		Phenix City AL 36868	□Remove
			□Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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TO CC AT	1.4. 26.4h4h4h	a data of Clina		(option	al)
(If an effec	ve date, if other than the ctive date is listed, the date must the date inserted in this bent's effective date on the limits.	ust be specific and cannot be block does not meet the a	applicable statutory fili	more than 90 days after fil	ing.) Pursuant to 605.0207 (3
Note: 1					
Note: 1 docume	l specifies a delayed effecti ed.	ive date, but not an effec	tive time, at 12:01 a.m	on the earlier of: (b)	The 90th day after the
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Note: I document the record ord is file	dune 22	. 2022	tive time, at 12:01 a.m	. on the earlier of: (b)	The 90th day after the
Note: I document the record ord is file	ed.	2022	etive time, at 12:01 a.m		The 90th day after the