

To:

Page: 2 of 6

L22000349985  
2022-10-03 14:09:21 CDT 18502419731 From: Santa Rosa Beach Receptionist  
H22000338693 3

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

{{(H22000338693 3)}}}



H22000338693 3

Note: DO NOT hit the REFRESH-RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : H&D ARENDALL HARRISON SALE LLC  
Account Number : 120190800128  
Phone : (850)769-3434  
Fax Number : (850)769-6121

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: jeampfield@bandfirm.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
164 WILDWOOD LAKES DR, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$30.00

2022 OCT -3 11:3:50

2022 OCT -3 AM 8:42

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

JENNIS  
OCT 03 2022

H22000338693 3

DocuSign Envelope ID: FC8BA56D-78A4-4A8E-8B14-2E36223B99AB

**COVER LETTER**

H22000338693 3

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 164 WILDWOOD LAKES DR, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRITNEY HASTINGS

\_\_\_\_\_  
Name of Person

164 WILDWOOD LAKES DR, LLC

\_\_\_\_\_  
Firm/Company

8547 E. ARAPAHOE RD SUITE J #512

\_\_\_\_\_  
Address

GREENWOOD VILLAGE, CO 80112

\_\_\_\_\_  
City/State and Zip Code

jeamplfield@handfirm.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Camplfield

\$50

650-0010

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

Area Code

Daytime 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 Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

H22000338693 3

To:

Page: 4 of 6

2022-10-03 14:09:31 CDT

18503449731

From: Santa Rosa Beach Receptionist

DocuSign Envelope ID: FC8BA56D-78A4-4A8E-8B14-2E36223B99AB

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

H22000338693 3

164 WILDWOOD LAKES DR, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/10/2022 and assigned  
Florida document number L22000349985.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

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 ADDRESS)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

, Florida

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.*

**If Changing Registered Agent, Signature of New Registered Agent**

DocuSign Envelope ID: FC8BA56D-78A4-4A8E-8B14-2E36223B99AB

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

H22000338693 3

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	BRITNEY HASTINGS	8547 E. ARAPAHOE RD SUITE J #512	<input type="checkbox"/> Add
		GREENWOOD VILLAGE, CO 80112	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JOEL HASTINGS	8547 E. ARAPAHOE RD SUITE J #512	<input type="checkbox"/> Add
		GREENWOOD VILLAGE, CO 80112	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BRITNEY HASTINGS	8547 E. ARAPAHOE RD SUITE J #512	<input checked="" type="checkbox"/> Add
		GREENWOOD VILLAGE, CO 80112	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JOEL HASTINGS	8547 E. ARAPAHOE RD SUITE J #512	<input checked="" type="checkbox"/> Add
		GREENWOOD VILLAGE, CO 80112	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

H22000338693 3

H22000338693 3

[illegible]

\_\_\_\_\_  
 Signature of a member or authorized representative of a member

\_\_\_\_\_  
 TYPED OR PRINTED NAME OF SIGNEE