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A. RIVERS

JAN 10 2023

COVER LETTER

TO:

Registration Section

. Division o	f Corporations	
EPIC SUBJECT:	Grand Adventures, LLG	С
		Name of Limited Liability Company
The enclosed Articl	es of Amendment and	fee(s) are submitted for filing.
Please return all cor	respondence concernin	ng this matter to the following:
	•	
	Tanya Pekrul	
		Name of Person
	Epic Grand A	adventures, LLC
	 	Firm/Company
	Z0Z 1 0W 03-	
	6064 SW 82n	
		Address
	Ocala, FL 34	476
		City/State and Zip Code
		roker@gmail.com
		mail address: (to be used for future annual report notification)
For further informat	tion concerning this ma	atter, please call:
Tanya Pekrul		352 644-1057
N	ame of Person	Area Code Daytime Telephone Number
Enclosed is a check	for the following amou	unt:
■ \$25.00 Filing F		
	Certificate	e of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy
		(additional copy is enclosed)
9. at 141 .		Samuel Add in
Mailing A	ddress: tion Section	Street Address: Registration Section
	of Corporations	Division of Corporations
P.O. Box	-	The Centre of Tallahassee
	see, FL 32314	2415 N. Monroe Street, Suite 810
	,	Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EPIC Grand Adventures, 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 $\frac{08/09/2022}{1}$ and assigned 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: Tanya Pekrul Name of New Registered Agent: 6064 SW 82nd PL New Registered Office Address: Enter Florida street address , Florida $\frac{34476}{2}$ Ocala City 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) author	rized 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>	<u>Address</u>		Type of Action
AMBR	Michael J. Miller			🗆 Add
		4315 SW 53	3rd Terrace Ocala, FL 34474	≣Remove
				Change
				🗆 A d d
				🗀 Remove
		 		Change
				□Add
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				□Change
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				□Change

famending any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary.)
	08/09/2022
ffective date, if other than the an effective date is listed, the date moder: If the date inserted in this ocument's effective date on the	he date of filing: (optional) nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 block does not meet the applicable statutory filing requirements, this date will not be listed as
record specifies a delayed effect l is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	. 2022
	Signature of a member or authorized representative of a member
Tanya Pekrul	
-	Typed or printed name of signee