1/17/23, 2.47 PM

Division of Corporations **Electronic Filing Cover Sheet**

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To:	Division of Corporations	2022
	Fax Number : (850)617-6383	∠ A> 3 €
From:		
	Account Name : LEGALINC CORPORATE SERVICES INC.	
	Account Number : I20180000011	₽
	Phone : (844)386-0178	
	Fax Number : (214)317-4754	

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

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RIGHTEOUS OAK LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Electronic Filing Menu Corporate Filing Menu

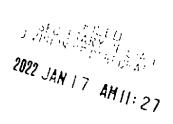
Help

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To: 18506176383 From: 14693173436 Date: 01/17/23 Time: 8:50 PM Page: 02/04

ARTICLES OF AMENDMENT TO

(((H23000019674 3))) ARTICLES OF ORGANIZATION OF



RIGHTEOUS OAK LLC			
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000377807</u>	were filed on and assigned and assigned		
This amendment is submitted to amend the following.			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	thity Company," the designation "LLC" or the abbreviation "L L C		
Enter new principal offices address, if applicable:	1500 Colonial Blvd, Suite 234		
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers FL, 33907		
Enter new mailing address, if applicable:	1500 Colonial Blvd, Suite 234		
(Mailing address MAY BE A POST OFFICE BOX)	Fort Myers, FL, 33907		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the new registere</u>		
New Registered Office Address:	Enter Florada sweet address		
-	, Florida		

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 statites 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 hability company has been notified in writing of this change.

To: 18506176383 From: 14693173436 Date: 01/17/23 Time: 8:50 PM Page: 03/04

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

(((H23000019674 3)))

Title	<u>Name</u>	Address	Type of Action
AMBR	CHIYUKI WILLIAMS	1500 Colonial Blvd, Suite 234	
		Fort Myers, FL, 33907	
			■ Cirange
AMBR	MARSHALL C WILLIAMS	1500 Colonial Blvd. Suite 234	□Add
		Fort Myers, FL, 33907	□Remove
			■ Change
			🗆 Add
			□Remove
			UChange
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ffective date, if other than the d an effective date is listed, the date most <u>fote:</u> If the date inserted in this bloo ocument's effective date on the Dep	ck does not meet the applica	to date of filmg or more able statutory filmg ((optiona e than 90 days after thir equirements, this da	l) ig) Puisuant to 608 0207 te will not be listed as
	date, but not an effective to	me, at 12 01 a m on	the earlier of (b)	The 90th day after the
l is filed	2022	·		
record specifies a delayed effective d is filed December 28th Clared Collins	2022	<u> </u>		

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