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Division of Corporations

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From:

Account Name

: REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1167 COX ROAD LLC

Certificate of Status	0
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DEC 05 7022 A. LUNT

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



1167 Cox Road 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 we Florida document number L22000378472	vere filed on 08/29/22	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	<u> </u>	
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	
B. If amending the registered agent and/or registered office ac agent and/or the new registered office address here: Name of New Registered Agent:	ldress on our records, <u>enter the name</u>	of the new registered
New Registered Office Address:		
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 provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	erformance of my duties, and I am fai ovided for in Chapter 605, F.S. Or, if	miliar with and this document is
If Chang	ing Registered Agent, Signature of New Regis	tered 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
AMBR	Christina Starmer	7901 4TH ST N STE 300	Xi Add
		ST. PETERSBURG, FL 33702	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			Remove
			Change
			ÜAdd
			□Remove
			□Change
			□Add
			□Remove
			□ Change

•	e, enter change(s) here: (Attach additional sheets, if necessary) or UF COME (Attach additional sheets) of necessary) of UF COME (Attach additional sheets)
	AH 11: 27
E. Effective date, if other than the dat (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depar	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(does not meet the applicable statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective da record is filed.	te, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated December 2	
	Morgan John
Sign	nature of a member or authorized representative of a member
Morgan Noble	
	Typed or printed name of signee

Filing Fee: \$25.00