

(((H23000227545 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FORSYTH & BRUGGER, P.A.

Account Number : I20040000147 Рһоле

Fax Number

: (239)263-6000 : (239)263-6757

ter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: RCYOUMANS @ YAHOO. C

😤 LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TWO TEN WEST, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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TWO TEN WEST, LLC		⊘		
(Name of the Limited Lis (A Fig	ability Company as it now appears on o	ar records.)		_
The Articles of Organization for this Limited Liabilit Florida document number L22000434816			and	l 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 designat	ion "LLC" or the	abbreviation	"L.L.C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET AD	DRESS)			
	· · · · · · · · · · · · · · · · · · ·			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our records <u>e</u> :	, enter the na	unc of the	
Name of New Registered Agent:				- E3
New Registered Office Address:				(
	Enter Florida stre	ci address		2
-	City	, Florida _	.Zip Co	w/e ^l
New Registered Agent's Signature, if changing Registe	ered Agent:			= =
I hereby accept the appointment as registered age provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	d complete performance of my du l agent as provided for in Chapte ered office address, I hereby con	ties, and I an r 605. F.S. O	familiar r. if this de	with and ocument is
	If Changing Registered Agent, Sig	nature of New F	Registered A	gent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 280002 2000523 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	GOODIER, CLAY	C/C Goodier Properties	
		307 International Circle, Suite 130	□ □ Removo
		Hunt Valley, MD 21030	
			⊡Add
			□Remove
			☐Change
			□Add
			□Remove
			□Change
		□Rcmove	
			Change
			□∧dđ
			□Remove
			□Change
			□Add
			□Remove
			□Change

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	ARTICLE VI
Ar	ticle VI is hereby amended to read:
Th	e Company shall be manager-managed. Control of the Company and all of its affairs shall be in the managers
Ry	an Youmans, whose address is 3435 Enterprise Ave., #25, Naples, FL 34104 and Clay Goodier, whose
ado	dress is C/C Goodier Properties, 307 International Circle. Suite 130, Hunt Valley, MD 21030 shall serve as
Со	-Managers.
Ex	cept as otherwise provided in the Operating Agreement of the Company, the Company shall not take any
act	ion without the consent of both Co-Managers.
_	
_	
cffecti <u>e:</u> lf	e date, if other than the date of filing: (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
cord s filed.	
i liled.	23/2023
6/2 6/2	Signature of a member or authorize vepresentative of a member

Filing Fee: \$25.00