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FALLAHASSEE, FLORI

RECEIVED

COVER LETTER

TO:

TO: Registration Division of C			
SUBJECT: HUN	ting (AM) Name of Limi	Roperties C	-11
The enclosed Articles	of Amendment and fee(s) are subi	nitted for filing.	
Please return all corres	pondence concerning this matter t	to the following:	
	Million.	Sullivant T	II
		Firm/Company	233/ CKA C / / / / / / / / / / / / / / / / / /
	Articles of Amendment and fee(s) are submitted for filing. Articles of Amendment and fee(s) are submitted for filing. All correspondence concerning this matter to the following: All correspondence concerning this matter to the following: All correspondence concerning this matter to the following: All correspondence concerning this matter to the following: All correspondence concerning this matter to the following: All correspondence concerning this matter to the following: All correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following amount: And correspondence concerning this matter to the following correspondence concerning this matter to the following: And correspondence concerning this m		
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	J S FRULK, A E-mail address: (City'State and Zip Code YG A F FELM ARKET (to be used for future annual report notif	a Jaltos. com
For further informatio			
William Nan	S//(///N) se of Person	at (<u>SSC</u>) 25 Area Code Daytime	Telephone Number
Enclosed is a check for	r the following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration of P.O. Box 6	on Section f Corporations 5327	Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations Tallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

HUNTING (AM)	16 Denties LLC	
(Name of the Limited Lizability Compar (A Florida Limited L	any as it how appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	1/-78-7022	
The Articles of Organization for this Limited Liability Company	were filed on // CB CC and assigned	1
Florida document number <u>L 2 2000 50 / 2.73</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ility 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)		
Graning madress (9717 DE 717 OFF OFF OFF	7 22	
	55EC F	T
B. If amending the registered agent and/or registered office a	address on our records, enter the name of the new rec	iste
agent and/or the new registered office address here:	\$88 888 9-9	·
	E C A	T
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	· ·	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	gree to act in this capacity. I further agree to comply w	ith

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with a 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being a or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MEMB	TERRY A. DoBS	ON 817 Blue CARERD	□Add
	,	ON 817 Blue (ARCRD	2344 ⊠ Remove
			□Change
			DAdd
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Note:	ive date, if other than the date of filing: certive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at tent's effective date on the Department of State's records.
he recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	2-9-2023
	Signature of a member or authorized representative of a member
	William J. Sillium II Typed or printed name of signee

Filing Fee: \$25.00