## L23000021100

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## COYER LETTER

TO:	Registration Sectorial Division of Corp.				
SUBJI	CT.	Patton G	- vil LLC		
20191	.c		ed Liability Company		
The en	closed Articles of A	mendment and fee(s) are subn	nitted for filing.		
		dence concerning this matter to			
		, and the second	a Pa Hon Name of Person	····	
		Patton G	Firm/Company		
		1/582 51	Village Fr	arkway	unit 157
		Port Saint	Address  Lucke Fl  City/State and Zip Code  LLC G G-Mal  be used for future annual report noti	34987	
		Tation at 1 B-mail address: (to	be used for future annual report not	fication)	2023
For fur	her information con	ncerning this matter, please ca	H:		
	Bresh	a Patton	at (954) 258	2026	<u> </u>
	Name of F	Person	at (954) 258 Area Code Daytim	ne Telephone Number - ;	:  0:32  -}}∂≆
Enclose	ed is a check for the	following amount:			
□ <b>\$</b> 25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Certificate o Certified Co (additional cop	of Status & opy
	Mailing Address: Registration Se Division of Cor		Street Address: Registration Se Division of Cor		

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 2 3 0000 2 // 00</u> .	were filed on $01/10/2023$ and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "LLC."	
Enter new principal offices address, if applicable:	41582 SW Village Parkway	<del>_</del>
(Principal office address MUST BE A STREET ADDRESS)	Port Saint lucie FL 34981	, _ _
Enter new mailing address, if applicable:	11582 SW Village Parkwen	<u>_</u>
(Mailing address MAY BE A POST OFFICE BOX)	11582 SW Village Parkwen Wit # 151 Port Saint lucke Fl 3498	_ 
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new regis	<u>terec</u>
Name of New Registered Agent:	53 53	
New Registered Office Address:	- 70 - V	
	Enter Florida street address	<del>,</del> –
	City , Florida Zip Coide	<del>!</del>
New Registered Agent's Signature, if changing Registered Agent:	· · · · · · · · · · · · · · · · · · ·	;
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as playing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document i	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized	rerson(s) autnorizeu	to manage, <u>enter</u>	the title, names and	ware son or seein ber	<u></u>
or removed from our rec	ords:				

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□ Change
			🗆 🖊 🗆 🖊
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