L230000246/0

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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO:	Registration Division of C	Section Corporations		
SUBJEC		AST PARK MOBILE HOMES	LLC	
505017	··· <u>-</u>	Name of Lir	nited Liability Company	
The encl	osed Articles	of Amendment and fee(s) are sul	omitted for filing.	
Please re	turn all corres	pondence concerning this matter	to the following:	
		NICHOLAS NEWCOME	3	
			Name of Limited Liability Company I fee(s) are submitted for filing. Ing this matter to the following: SINEWCOMB Name of Person T PARK MOBILE HOMES LLC Firm/Company METTO PASS LN Address ORDA, FL 33982 City/State and Zip Code EEPING15@GMAIL.COM Inail address: (to be used for fiture annual report notification) atter, please call: 239 Area Code Daytime Telephone Number unt: Ing Fee & S55.00 Filing Fee & S60.00 Filing Fee	
		SUNCOAST PARK MO	BILE HOMES LLC	
			Firm/Company	
		17614 PALMETTO PAS	S L.N	
			Address	
		PUNTA GORDA, FL 33	982	
			City/State and Zip Code	<u></u>
		E-mail address: (to be used for future annual report noti	fication)
For furth	er information	concerning this matter, please c	all:	
NICHO	LAS NEWCO	МВ	= === 0000	
	Name	of Person		e Telephone Number
Enclosed	is a check for	the following amount:		
□ \$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	Mailing Addre			
	Registration Division of (Section Corporations		

Division of Corporations 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)	iny as it now appears on our records.)	
(A Florida Limited	Liability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 01/11/2023	and assigned
lorida document number L23000024610		and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company hara	
and the same of the miniculation	mey company nere.	
ne new name must be distinguishable and contain the words "Limited Liabil	lity Company " the decignation "I I C" as	should be set to the
		me appreviation "L.L.C."
nter new principal offices address, if applicable:	17614 PALMETTO PASS LN	202
Principal office address MUST BE A STREET ADDRESS)	PUNTA GORDA, FL 33982	i9
		, f
nter new mailing address, if applicable:	17614 PALMETTO PASS LN	
Mailing address MAY RE A POST OFFICE BOX)	PUNTA GORDA, FL 33982	
THE STOTICE BOX		. 23
		
If amending the registered agent and/or registered office a	اد د داد د د د د د د د د د د د د د د د	<i>*</i> .•
ent and/or the new registered office address here:	luaress on our records, enter the	name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	-
	Florida	ı
	Ciny	Zip Code

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 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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	NICHOLAS NEWCOMB	17614 PALMETTO PASS LN	
		PUNTA GORDA, FL 33982	
			■Change
			□Add
			□Remove
			□Change
			□Remove
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove

ective date, if other than the date of filing: 106/04/2024 (optional) 10flective 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 10flective 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 10flective date in this block does not meet the applicable statutory filing requirements, this date will not be listed as runnent's effective date on the Department of State's records. 10flective date on the Department of State's records. 11flective date on the Department of State's records. 12flective date on the Department of State's records. 12flective date on the Department of State's records.	C	HANGE PRINCIPAL, MAILING ADDRESS, AND AMBR ADDRESS
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MICHOLAS NEWCOMB		Signature of a member or authorized representative of a member