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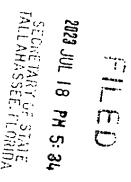
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**©** (352) 432-8859

(888) 384-2442

john@marshalllawpa.com

P.O. Box 940Wildwood, FL 34785

July 7, 2023

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: 7 Amendments to Florida Limited Liability Companies

Dear Sir or Madam:

Please find enclosed amendment forms for the following Limited Liability Companies ("LLC"):

• Delphina Loop, LLC;

- Gordon Path, LLC;
- Hill Street, LLC:
- Honevsuckle Ave. LLC;
- McCray Ave, LLC;
- Purslane Place, LLC; and
- Torch Lake Drive, LLC.

The amendments are for the purposes of changing the registered agent and provide a statement to the general public that each of these LLCs are single-member, manager-managed LLCs.

Please process accordingly and let me know if you have any questions or concerns.

Respectfully.

John T. Marshall, Esq.

Enclosures

Cc: Allen Rosenthal, Manager

## **COVER LETTER**

Tallahassee, FL 32314

	Registration Se Division of Cor						
an marc	Gordon Pat	h, L1.C					
SUBJEC	.1:	Name of Limi	ited Liability Company				
The enclo	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please re	turn all correspo	ndence concerning this matter	to the following:				
		Allen Rosenthal					
			Name of Person				
			Firm/Company				
		2951 Burnett Terrace					
			Address				
		The Villages, Florida 3216	53				
			City/State and Zip Code	<del></del>			
		racd44@yahoo.com  E-mail address: ()	to be used for future annual report noti	fication)			
For furth	er information c	oncerning this matter, please ca	all:				
John T.	Marshall, Esq.		352 432-8859				
Name of Person			at () Area Code Daytim	e Telephone Number			
Enclosed	l is a check for th	ne following amount:					
<b>\$25.</b>	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address		Street Address: Registration Se	ction			
Registration Section Division of Corporations			Division of Corporations				
	P.O. Box 632	27	The Centre of T	lallahassee lallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gordon Path, LLC			
(Name of the Limi	ted Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) ny)	
he Articles of Organization for this Limited L	iability Company were filed on	January 23, 2023 and assigned	d
orida document number L23000040246	·		
is amendment is submitted to amend the foll	owing:		
If amending name, enter the new name of	f the limited liability compan-	<u>v here</u> :	
e new name must be distinguishable and contain the	words "Limited Liability Company," t	the designation "LLC" or the abbreviation "L.L.C."	
ter new principal offices address, if applic	eable:	LEC 3	
rincipal office address MUST BE A STREE	ET ADDRESS)		700
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nter new mailing address, if applicable:			
ailing address MAY BE A POST OFFICE	<u>BOX)</u>	22 <b>32</b> 55 <b>6 5 6 6</b>	
			ictor
If amending the registered agent and/or ent and/or the new registered office addre		or records, enter the hame of the new reg	istei
Name of New Registered Agent:	Allen Rosenthal		
New Registered Office Address:	2951 Burnett Terrace		
new neglistered Office Address.	Enter	Florida street address	
	The Villages	Florida 32163	
	City	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 Changing Registered Agent, Signature of New Registered 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>	Name	Address	Type of Action
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effective date is listed, the date mu e: If the date inserted in this b	st be specific and cam lock does not meet	not be prior to the applicabl	date of filing le statutory	or more than 9 filing require	) days after fili ments, this d	ing.) Pursuant t ate will not b	o 605.0 e listed
ument's effective date on the D	epartment of State	's records.					
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Filing Fee: \$25.00

Typed or printed name of signee