L23000079448

(Re	questor's Name)	
(Ad	idress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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A. RIVERS APR 2 5 2023

COVER LETTER

TO:

Tallahassee, FL 32314

	tion Section of Corporations		
SUBJECT: WES	STWOOD DEVELOPMENTS.	, LLC	
SUBJECT.	Name	of Limited Liability Company	
The enclosed Artic	cles of Amendment and fec(s) a	are submitted for filing.	
Please return all co	orrespondence concerning this	matter to the following:	
	MICHAEL J. DARI	вч	
	 -	Name of Person	
	EMMERSON, LLC		
		Firm/Company	
	P.O. BOX 28001		
		Address	
	PANAMA CITY, F	L 32411	
	chadmbruce@gmail.	City/State and Zip Code	
	E-mail ad	dress: (to be used for future annual r	eport notification)
For further inform	ation concerning this matter, pl	ease call:	
Chad Bruce			-0839
i	Name of Person	at ()Area Code	Daytime Telephone Number
Enclosed is a chec	k for the following amount:		
■ \$25.00 Filing	Fee \$30.00 Filing Fee Certificate of Sta		Certificate of Status &
Division	ition Section n of Corporations		dress: tion Section of Corporations
P.O. Bo	x 6327	The Cen	tre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WESTWOOD DEVELOPMENTS, LI	· -
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number L23000079448	ility Company were filed on FEBRUARY 13, 2023 and assigned
This amendment is submitted to amend the follow	
A. If amending name, enter the new name of the	ne limited liability company here:
LINCOLN DEVELOPMENTS, LLC	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
B. If amending the registered agent and/or regi	istered office address on our records, enter the name of the new registere
agent and/or the new registered office address b	nere:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	APPER FINE SIZE COMMON COLU
-	, Florida Zin Code
	C III In Undo

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>	Name	Address	Type of Action
			□∧dd
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Remove
			□Change
			
			□Remove
			□Change
			□Remove
			□ Change
 			□Add
			□Remove
			□Change

	
Note:	ive date, if other than the date of filing:
the reco cord is f	rd 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	FEBRUARY 23 2023

Typed or printed name of signee