(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500403906555

7023 MAR 22 NM 9: 27

A. BUTLER MAR 2 3 2023

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 03/22/202	23		**WALK IN**
ENTITY NAME Fair	banks Winter Park, I	LC	
DOCUMENT NUMB	ER		
	PLEASE FILE	THE ATTACHED AND RETURN	
XXXX_	Plain Copy		
	Certified Copy		
	Certificate of Status		
	PLEASE OBTAIN TH	E FOLLOWING FOR THE ABOVE ENTIT	74
	Certified Copy of Ar	ts & Amendments	
	Certified Copy of Ar	ts & Amendments Complete File (Including t	Annual Reports)
	Certificate of Status		
	Certificate of Status	Reflecting:	
	APOSTILLE',	/ NOTARIAL CERTIFICATION	
COUNTRY OF DESTI	NATION		
NUMBER OF CERTIF	ICATES REQUESTED	,	
TOTAL OWED \$25	.00	ACCOUNT # 1201600000	172 W: () W
Please call Tina a	t the above number fo	r any issues or concerns. Thank	goa so mach!

COVER LETTER

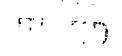
	tration Sec ion of Corp			
	airbanks W	inter Park, LLC		
SUBJECT: _		Name of Limi	ted Liability Company	
The enclosed A	Articles of A	mendment and fee(s) are subt	nitted for filing.	
Please return a	Il correspon	dence concerning this matter t	to the following:	
		Kenneth L. Schlitt		
			Name of Person	 -
		Keating & Schlitt, P.A.		
			Firm/Company	
		250 East Colonial Drive, S	uite 300	
			Address	
		Orlando, FL 32801		
			City/State and Zip Code	
		E-mail address: (t	o be used for future annual report noti	fication)
For further infe	ormation co	ncerning this matter, please ca	ill:	
Kenneth Schli	itt		407 425-2907	
	Name of	Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a c	check for the	e following amount:		
□ \$25.00 Fil	ling 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)
	ng Address stration S		Street Address: Registration Se	ection
Divi		orporations	Division of Cor The Centre of T	rporations

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 MAR 22 AM 9: 27

FAIRBANKS WINTER PARK, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on February 21, 2023 ____ and assigned Florida document number L23000093828 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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	<u>Address</u>	Type of Action
MGR	Cory Kroeger	750 Jackson Avenue, Suite 104	≅ ∧ud
		Winter Park, FL 32789	□Remove
			[∃Change
			□Add
			□Remove
			□Change
			☐Add
			Remove
			□ Change
			□Add
			□Remove
		<u> </u>	
			□Add
		<u>.</u>	□Remove
			□Add
			□Remove
			[Change

					·
	 .				
		<u></u>			<u>-</u>
					
	_				
					
					
					
		· · · · · ·			
					
Tective date, if other than the an effective date is listed, the date menter If the date inserted in this becoment's effective date on the I	lock does not meet th	ie applicable stat	filing or more than 9 utory filing require	(optional) 0 days after filing.) Purs ments, this date will	sunnt to 605.0207 not be listed as
record specifies a delayed effecti is filed.	ve date, but not an eff	fective time, at 1	2;01 a.m. on the ea	rlier of: (b) The 900	h day after the
March 21	202	23			
		<u> </u>			
	Signature of a membe	er or authorized see	resemblive of a men	ber	

Filing Fee: \$25.00