L23000 | 3687

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #	f)
PICK-UP WAIT	MAIL
(Business Entity Name)
(Document Number)	 -
Certified Copies Certificates o	f Status
Special Instructions to Filing Officer:	
	J. HORNE APR 2 0 2023

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Incorporating Services, Ltd.

incserv

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau mmoreau@incserv.com 850.656.7953

,		
REQ	UEST DATE	4/19/2023

PRIORITY Regular Approval

OUR REF # (Order ID#) 1141625

ORDER ENTITY____

PARK 360 LLC

PLEASE PERFORI	M THE FOLLOWING SERVICES:
PARK 360 LLC	

File the attached amendment

NOTES: \$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Wednesday, April 19, 2023 Page 1 of 1

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
	LC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Lonnie, Tingle A, JR.		
		Name of Person	
	Park 360 LLC		
		Firm/Company	
	Name of Limited Liability Company sed Articles of Amendment and fee(s) are submitted for filing. arm all correspondence concerning this matter to the following: Lonnie, Tingle A, JR. Name of Person Park 360 LLC Firm/Company 3702 W Spruce Street 1260 Address Tampa, Florida 33607 City/State and Zip Code Park360Tampa@gmail.com E-mail address: (to be used for future annual report notification) r information concerning this matter, please call:		
		Address	
	Tampa,Florida 33607		
		City/State and Zip Code	 _
		·	ort notification)
For further information of	concerning this matter, please c	all:	
Lonnie,Tingle A, JR.			955
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for the	he following amount:		
	□ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
Registration ! Division of C	Section Torporations	Registratio Division o	n Section f Corporations
P.O. Box 632	./	The Centre	of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Park 360 LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L23000136877	y were filed on <u>03/17/2023</u>	Made a Regioned
This amendment is submitted to amend the following:		PR 19
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" o	
Enter new principal offices address, if applicable:	3710 E. Martin Luther King Jr.	Blvd, Tampa,FL 33610
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	PO Box 4352	
(Mailing address MAY BE A POST OFFICE BOX)	Tampa,FL 33677	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter th	e name of the new registered
New Registered Office Address:	Enter Florida street address	
	, Flori	
	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 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	LaTarsus A Porter	3702 W Spruce Street 1395 Tampa, Florida 3360)7
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
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ctive date, if other than the	date of filing:			(ontional)	
effective date is listed, the date must	be specific and cannot b	e prior to date of fi	ling or more than 90	(optional) days after filing.) Pursu	ant to 605.020
 e: If the date inserted in this blo ament's effective date on the De 	ck does not meet the partment of State's re	applicable statute cords.	ory filing requirem	ents, this date will no	ot be listed a
ord specifies a delayed effective	date, but not an effec	tive time, at 12:0	I a.m. on the earl	ier of: (b) The 90th	day after the
filed.					
, April 18th	2023				
ed	·	·			
		_			
		-9	- -		

Filing Fee: \$25.00