

6/8/23, 11:31 AM

Division of Corporations

# L23000219938

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H23000207310 3)))



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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GASSMAN, CROTTY & DENICOLA, P.A.  
Account Number : 075350000514  
Phone : (727)442-1200  
Fax Number : (727)443-5829

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SHORE ENOUGH 4, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help S. ROBERTS

JUN - 8 2023

**ARTICLES OF AMENDMENT**  
**TO**  
**ARTICLES OF ORGANIZATION**  
**OF**

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SHORE ENOUGH 4, L.L.C.

(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 May 3, 2023 and assigned  
Florida document number L23000219938

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:

7515 Quaker Avenue, Suite 300

(Principal office address MUST BE A STREET ADDRESS)

Lubbock, TX 79424

Enter new mailing address, if applicable:

7515 Quaker Avenue, Suite 300

(Mailing address MAY BE A POST OFFICE BOX)

Lubbock, TX 79424

**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

\_\_\_\_\_, Florida \_\_\_\_\_  
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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SBM MANAGEMENT, LLC	7515 Quaker Avenue, Suite 300	<input checked="" type="checkbox"/> Add
		Lubbock, TX 79424	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SBM HOLDINGS, LP	12413 Quaker Avenue	<input type="checkbox"/> Add
		Lubbock, TX 79424	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective 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 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated June 8, 2023

Signature of a member or authorized representative of a member

Kenneth J. Crotty, Authorized Representative

Typed or printed name of signor

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**Filing Fee: \$25.00**