

L23000238513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

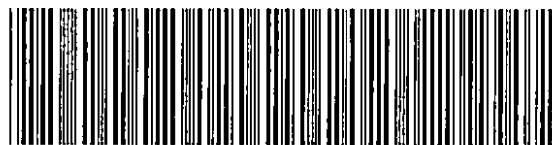
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2024 AUG 12 AM 10:35

STATE
CLERK OF STATE
TALLAHASSEE, FLORIDA

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2024 AUG 12 AM 9:40

STATE
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CT CORP
(850) 656-4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 08/12/2024

Acc#I20160000072

en: c DW

Name:	Caliber Hobe Sound Op Co, LLC
Document #:	
Order #:	15809460

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
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Amount: \$ **25.00**



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

FILED

2024 AUG 12 AM 9:37

Caliber Hobe Sound Op Co. LLC

(Name of the Limited Liability Company as it now appears on our records) STATE OF FLORIDA
(A Florida Limited Liability Company) FILED FOR RECORD

The Articles of Organization for this Limited Liability Company were filed on 5/15/2023 and assigned
Florida document number 123000238513.

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:

C T Corporation System

New Registered Office Address:

1200 South Pine Island Road

Enter Florida street address

Plantation


City

Florida 33324

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.



Stephanie Hencz, Assistant Secretary

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
	William McCall	3625 Cumberland Boulevard	<input type="checkbox"/> Add
		Suite 1150	<input checked="" type="checkbox"/> Remove
		Atlanta, GA 30339	<input type="checkbox"/> Change
	Daniel York	3625 Cumberland Boulevard	<input type="checkbox"/> Add
		Suite 1150	<input checked="" type="checkbox"/> Remove
		Atlanta, GA 30339	<input type="checkbox"/> Change
MGR	Shawn Lucht	3625 Cumberland Boulevard	<input checked="" type="checkbox"/> Add
		Suite 1150	<input type="checkbox"/> Remove
		Atlanta, GA 30339	<input type="checkbox"/> Change
MGR	Karen Reid	3625 Cumberland Boulevard	<input checked="" type="checkbox"/> Add
		Suite 1150	<input type="checkbox"/> Remove
		Atlanta, GA 30339	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

F. Effective date, if other than the date of filing: _____ (optional)

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 August 9, 2024

Karen A. Reel

Signature of a member or authorized representative of a member

Karen Reid

Typed or printed name of signee

Filing Fee: \$25.00