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06/15/23--01004--007 **50.04

LLC forend. DC 6-13-23



COVER LETTER

TO: **Registration Section Division of Corporations** HNS Londrol SUBJECT: ding Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

S55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF C HNS Landholding	AMENDMENT TO DRGANIZATION DF S S S S S S S S S S S S S S S S S S
The Articles of Organization for this Limited Liability Company	were filed on $MAY = 30,2023$ and assigned
Florida document number 123000261450	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	bility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (<i>Principal office address MUST BE A STREET ADDRESS</i>)	1992 Lewis Turner Blud Suite 1067-2157 Ft Walton Bch, FL 32547
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>	1992 Lewis Turner Blvd. Suite 1067-2157 Ft. Walton Bch, FL 32547
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>

Name of New Registered Agent:		······
New Registered Office Address:	1992 Lewis T	Urner Blud
C	Suite 1067 - 2157	eet address
	Etwalton Bch	Florida , 32547
	Cin	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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Suite 1067-2157	🗆 Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 1 a E R Signature of a member or authorized representative of a member

Larry Italk_ Typed or printed name of signee