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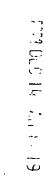
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

Division of Cor			
TomProp 5	5 Nature Way, LLC		
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:	
	John Clyde Tomlinson, Jr.		
		Name of Person	
		Firm/Company	
	PO Box 6260		
		Address	
	Longview, TX 75608		
		City/State and Zip Code	
	jetomlinson1@aol.com		
The Combon in Committee of		to be used for future annual report notificati	(00)
	oncerning this matter, please c		
Theresa Knower		239 333-4910 at ()	
Name o	f Person	Area Code Daytime Tel	lephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing 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)
Mailing Addres Registration S		Street Address: Registration Sectio	n
Division of C		Division of Corpor	

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Compa	iny as it now appears on a	our records.)	
	(A riorida Limited)	Liaomiy Company)		
The Articles of Organization for this Limited I	Liability Company	were filed on $\frac{06/13/26}{2}$	023	_ and assigned
llorida document number 1.23000285579	 .			
This amendment is submitted to amend the fol	llowing:			
a. If amending name, enter the new name	of the limited liab	oility company here:		
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design:	ation "LLC" or the abbro	viation "L.L.C."
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		55 Nature Way, Unit	100-1	
		Santa Rosa Beach, FL 32459		
				
nter new mailing address, if applicable:		PO Box 6260		
Mailing address MAY BE A POST OFFICE BOX)		Longview, TX 75608	3	
	- W. W.			• • • • • • • • • • • • • • • • • • • •
				Ę
 If amending the registered agent and/or gent and/or the new registered office addr 		address on our record	ds, <u>enter the name c</u>	of the new regis
				* 1
Name of New Registered Agent:	John Clyde Tor	nlinson, Jr.		<u> </u>
New Registered Office Address:	55 Nature Way	. Unit 100-1		
		Enter Florida st	reet address	
	Santa Rosa Bea	ach	Florida 32459)
	-	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.

John Clyde Tomlinson

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>	Address	Type of Action
MGR	1031 Reverse Exchange Company I	15671 San Carlos Blvd. #101	
		Fort Myers, FL 33908	■ Remove
			□Change
MGR	John Clyde Tomlinson, Jr.	PO Box 6260	= Add
		Longview, TX 75608	□ Remove
			□Remove
			□Change
			□Add =
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fective date, if other than the c	lote of filings		(antional)	
fective date, if other than the on effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the Department.	ck does not meet the applicable.	e of filing or more than 90 statutory filing requirer	days after filing.) Pursuan nents, this date will not	n to 605.0 be listed
ecord specifies a delayed effective is filed.	date, but not an effective time, a	a 12:01 a.m. on the ear	lier of: (b) The 90th d	lay after
November 15	2023			
ned November 15 Moresa Kno	un)			
	Signature of a member or authorized	representative of a memb	per	