## 123000313644

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

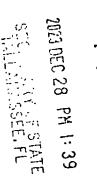




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## **COVER LETTER**

TO:	Registration So Division of Co	ection rporations		
0.1.m. 457.57		r Hospitality Managment LLC		
SUBJEC	T:	Name of Limi	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Christina Rickman		-
			Name of Person	
		Sevensriver Hospitality Ma	anagment LLC	
			Firm/Company	
		495 Grand Blvd. Suit 206 J	J	
			Address	-
		Miramar Beach 32550, Fl.		
			City/State and Zip Code	-
		sevensriver@outlook.com		~2
		E-mail address: (	to be used for future annual report notification)	
For furth	ner information	concerning this matter, please ca	all:	EC ?
Christina	a Rickman		865 308-7721 at ()	- 60 - 70 - 70 - 70 - 70 - 70 - 70 - 70
	Name	of Person	Area Code Daytime Telephone Number	2023 DEC 28 PM 1: 39 SEE STATE SEE LEADERS SEE FL
Enclosed	t is a check for	the following amount:		rrı W
<b>■</b> \$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ite of Status &
	Mailing Addre Registration Division of O P.O. Box 63	Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sevensriver Hospitality Managment LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	inv as it now appears on our records.) Liability Company)	
	were filed on <u>06/30/2023</u>	and assigned
Florida document number L23000313644		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	tited Liability Company were filed on 06/30/2023 and assigned on of the limited Liability Company here:  ame of the limited liability company here:  ame of the limited Liability Company," the designation "LLC" or the abbreviation "LLC." applicable:  STREET ADDRESS)  ole:  and/or registered office address on our records, enter the name of the new registered address here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del>-</del>
(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 agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, <u>enter th</u>	e name of the new registered
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
	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>	Name	Address	Type of Action
MGR	CHRISTOPHER WATKINS	495 Grand Blvd Suite 206J, Miramar Beach 32550, FI	_ <b>∃</b> Add
			_ □Remove
			_ 🗆 Change
			_ □Add
			_ □Remove
			_ □Change
			_ □Add
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ffective date, if other than the an effective date is listed, the date in Sote: If the date inserted in this ocument's effective date on the	ust be specific and block does not t	deannot be prior neet the applic	to date of filing able statutory	or more than 96 filing require:	(optiona days after fili ments, this da	ng.) Pursuant to 60	05.020 sted a:
record specifies a delayed effect d is filed.	ive date, but no	t an effective ti	me, at 12:01 a	i.m. on the ea	lier of: (b)	The 90th day af	ter the
Dec. 26		. 2023	·				
	-	ekmo					

Filing Fee: \$25.00