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## **COVER LETTER**

TO: Registration Se Division of Cor			
The Cove C	Clubhouse LLC		
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Katie Kushnak		
		Name of Person	
	·	Firm/Company	
	1518 Cedar Grove Ter		
		Address	
	Fleming Island, FL 32003		
	neeperkl@yahoo.com	City/State and Zip Code	
	E-mail address; (	to be used for future annual report not	itication)
For further information of	concerning this matter, please c	all:	
Katie Kushnak		904 575-0443	
		at ()	ne Telephone Number
Name o	n' Person	Area Code Daytin	e Telephone Number
Enclosed is a check for t	he 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		Street Address:	ection
Registration Division of C		Registration Se Division of Cor	
P.O. Box 632	•	The Centre of T	Γallahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

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

The Cove Clubhouse LLC

2023 AUG -7 AH 7: 39

(A Florida Limited)	any as it now appears on our records.) Liability Company) Are Area.
The Articles of Organization for this Limited Liability Company Florida document number	were filed on http://www.and.assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	1880 Eastwest Pkwy #8594 Fleming Island, FL 32006
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1880 Eastwest Pkwy #8594 Fleming Island, FL 32006
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new regi
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Enter Florida street address

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>	<u>Name</u>	<u>Address</u>	Type of Action
11111	Elle O'Neal	677 Chestwood Chase Dr.	
AMBR		Orange Park, FL 32065	<b>■</b> Add
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