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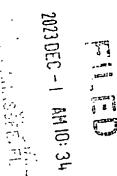
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COVER LETTER _

Registration Section Division of Corporations

TO:

SUBJECT:				
	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter	-		
		Name of Person		
		Firm/Company		2023
	<u> </u>			2023 DEC -1 AM 10: 34
		Address		NSSE
		City/State and Zip Code		0: 34 E. F.
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notif	ication)	
Chuck Tucker	σσ., γ. σσ., γ. σσ. γ. σσ. γ. σσ. σσ. γ. σσ. σσ. γ. σσ. σσ. σσ. σσ. σσ.	850 250-5595		
Name o	f Person	at () Area Code Daytime	: Telephone Number	
Enclosed is a check for th	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Addres Registration S Division of C P.O. Box 632	Section forporations	Street Address: Registration Sec Division of Corp The Centre of T	porations	
Tallahassee, I		2415 N. Monroe		10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH OAK TITLE ROSEMARY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compa	ny were filed on 7/21/2023	and assigned
Florida document number L23000346043		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
SOUTH OAK TITLE INLET LLC		702
The new name must be distinguishable and contain the words "Limited Lin	ability Company," the designation "LLC	or the abbreviation L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		4
		SE T
		0: 0
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
(Matting Lauress MAT BL ATOST OTTTCL DOM)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent:	e address on our records, <u>enter</u>	the name of the new registered
New Registered Office Address:		
	Enter Florida street addres	ŝ.s
		orida
- i	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>1t:</u>	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	ete performance of my duties, a ss provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is
TO CO.	hanging 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
			
			□Remove
			Change
			□Add
			□Remove
			20c hange
			—————————————————————————————————————
			ည် DChange
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. e 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 tord is filed. November 20 2023	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 605.021 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. The effective date and the properties and delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the right of the properties of the propert							
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Signature of a member or authorized representative of a member	Tignature of a member or authorized representative of a member			Wow	authorized correson	lative of a member		_
		C'harlan "	Chuck" Tucker					

Filing Fee: \$25.00