Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000343627 3)))



H230003436273ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

யக்கோail	Address:		
} · -		 	
<{ }= (
· · £ : : :			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLORIDA MAC MOSSY HEAD, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

SEP 3 0 2023

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

COVER LETTER

H23000343627

	istration Sec ision of Corp				
	Florida Mac	Mossy Head, LLC			
SUBJECT:		Name of Limited Liability Company			
	. هم د داد د د	Amendment and fee(s) are subn	witted for filing.		
		xience concerning this matter t			
		Megan McCracken			
			Name of Person		
		Steptoe & Johnson PLLC			
			Firm/Company		
		101 N. Robinson Ave., Ste. 500 Address			
			City/State and Zip Code		
		rick.warren@steptoe-johnso	on.com o be used for future annual report notific	ahan)	
For further i	information o	oncoming this matter, please or			
Rick L. Warren		405 816-9223 at (Telephone Number		
	Хапо о	(Person	Area Code Daytimo	Lalephone Number	
Enclosed is	a check for th	ne following amount:			
₩ \$25.00	Filing Fee	S30.00 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) 	
	ailing Addre		Street Address Registration Sec		
D	ivision of C	Corporations	Division of Corp The Centre of T	porations allahassee	
D	O Box 630	7.7	TUE CERRE OF I	ENT & FREE SANGETURES AND ASSESSMENT ASSESSMENT AND ASSESSMENT AND ASSESSMENT ASSESSME	

H23000343627

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H23000343627

Plorida Mao Mossy Head, LLC		
Name of the Limited Limiter Course (A Florida Limited I	ny na it new supears on our records.) Lability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 123000431176	were filed on September 21, 2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited linb	liky company here:	
Florida AT Mossy Head, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BR 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:	address on our records, enter the na	me of the new resistered
Name of New Registered Agent:		- 1 2 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E 2
New Registered Office Address:		-
	Enter Florida street address	
	, Florida _	
 _	City	Zip Code —
New Registered Agent's Signature, if changing Registered Agent	i	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete	ree to act in this capacity. I further of performance of my duties, and I am	igree to comply with the n familiar with and or if this document is

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

If Changing Registered Agent, Signature of New Registered Agent

H23000343627

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 = MARIE AMBR = A	GR = Manager MBR = Authorized Member		112300034302
Title	Naire	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			C]Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Remove
			Change
			□Add
			□ Remove
			☐ Change
			□Add
			□ Remove
			Change

H23000343627

a mending	any other information, enter change(s) here: (Anach additional sheats, if necessary.)
	
	
MAGA: 17 11:1	ate, if other than the date of filing: 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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
o record spo rd is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Ryan Thorley Signature of a member or authorized representative of a member
	Rugan Thoslar
•	Signature of a member or authorized representative of a member
	Ryan Thorley
	Typed or printed name of signee

Filing Fee: \$25.00 H23000343627