

L23000455151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

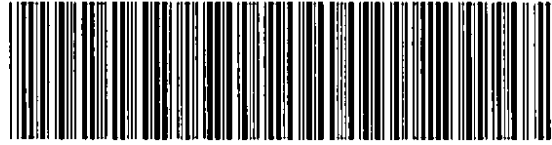
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800417972698

FILED
DIVISION OF STATE &
2023 NOV -2 PM 12:40

RECEIVED
2023 NOV -2 AM 11:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. HUNT
11/02/23



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations
From: Eyliena Baker
Ext: 61594
Date: 11/02/23
Order #: 1305618-1
Re: Tesoro Club Realty, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed-please-find: --

Amount to be deducted from our State Account: \$25.00 - FL State Account Number
I20000000195 Authorization:

Please take the following action:
File in your office on basis
Issue Proof of Filing

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DEPT OF STATE
DIVISION OF CORPORATIONS

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TESORO CLUB REALTY, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandy Spring

Name of Person

c/o Robert Martin Company, LLC

Firm/Company

100 Clearbrook Road - 2nd Fl.

Address

Elmsford, New York 10523

City/State and Zip Code

sspring@rmcdev.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandy Spring

914

593-7918

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 NOV - 2 PM 12:40

1000
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32303

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

TESORO CLUB REALTY, 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 Company were filed on October 2, 2023 and assigned
Florida document number L23000455151.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **Florida** _____
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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Timothy M. Jones	1401 Forum Way, Suite 820	<input type="checkbox"/> Add
		West Palm Beach, FL. 33401	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	E. Llwyd Ecclestone III	1555 Palm Beach Lakes Blvd., Suite 300	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL. 33401	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2003 NOV 2 PM 12:40
DIVISION OF CORPORATE AFFAIRS
STATE OF FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

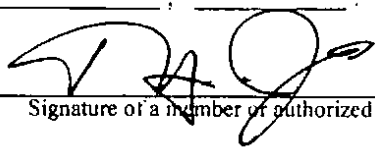
Blank lines for amending information.

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STATE OF CONNECTICUT

E. 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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the 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 the record is filed.

Dated November 1, 2023



Signature of a member of authorized representative of a member

Timothy M. Jones

Typed or printed name of signee