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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (\$12)597-0678

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

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GULF ECOESSENTIALS LLC

Certificate of Status	U
Certified Copy	0
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Estimated Charge	\$25.00

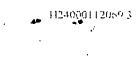
Electronic Filing Menu Corporate Filing Menu Help

From: ZenBusiness User

MAR 2 8 2024

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## ARTICLES OF AMENDMENT TO " ARTICLES OF ORGANIZATION OF



Gulf EcoEssentials LLC (Name of the Limited Liability Compa- (A Florida Limited )	ny as it now appears on our record hability (company)	Σ,)
The Articles of Organization for this Limited Liability Company Florida document number 1.23000500333	were filed on 11/02/2023	andassigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Palo Creek LLC		
The new mane must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL;"	or the abbreviation [1]. [1]
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	ada ( )	50
		, o
		3
Interney mailing address, if applicable:		<del>-1</del>
graining data ess past DL 3 February OFFICE DOOR	<del></del>	·
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	
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	y
	, Flo	orida
	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 affice 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

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0:		Page: 3 of 4

MGR = Manager

# 2024-03-26 10:17:08 UTC÷14

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From ZenBusiness User

H240001120693

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR =	Authorized Member		
<u>l'itle</u>	Name	Address	Type of Action
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			[]Remôve
			□ Change
· · · · · · · · · · · · · · · · · · ·			□Add
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To:

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# Page 2 of 3

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Iffective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	ck does not meet the	applicable stat	mory filing requ	trements, this date	) ) Pursuant to 605,0207 will not be listed as
e record specifies a delayed The 90th day after the reco		out not an ef	fective time,	at 12:01 a.m.	on the earlier of
March 25th	2024	<b>.</b>			
	Samantha				
	Signature of a number				

Page 3 of 3

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