L23000504045

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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Sebring L	CKE FORT Proper	ties, LLC
	Name of Limi	ted Liability Company	
The enclosed Articles of A	amendment and fee(s) are subt	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	A	Name of Person)
	Sebring Lak	Ke Front Propertie	es, LCC
	915 Ma	11 Pling Rd Address	
	Sebr	City/State and Zip Code	
	E-mail address: (t	V o a Scill Ho Coma V be used for future annual report notification	ication)
For further information co	ncerning this matter, please ca	Al:	
Audres A	SCIUTTO Person	at (<u>863</u>) <u>273-2</u> Area Code Daytime	C Telephone Number
Enclosed is a check for the	e 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)
Mailing Address Registration S		Street Address: Registration Sec	tion
Division of Co	orporations	Division of Con	
P.O. Box 6327	•	The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 Co	ompany were filed on 11+6-	2023 and assigned
Florida document number <u>L23000504045</u>	_,	1.5.5 DE
This amendment is submitted to amend the following:		E 27
A. If amending name, enter the new name of the limit	ed liability company here:	3. B
sebring Lakefront	Properties LLC	
The new name must be distinguishable and contain the words "Limite	ed Liability Company." the designation	a "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records,	enter the name of the new registered
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 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
<u> </u>			□ Add
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Add
			☐ Remove
			☐ Change
.			□Add
			□C 'h anno

	
****	<u>*</u>
-	
an effecti iote: If t	date, if other than the date of filing:
record spliced.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
ated	December 19 . 2023.
	allyllen
	Signature of a member of authorized representative of a member
	Andrey Asciatto