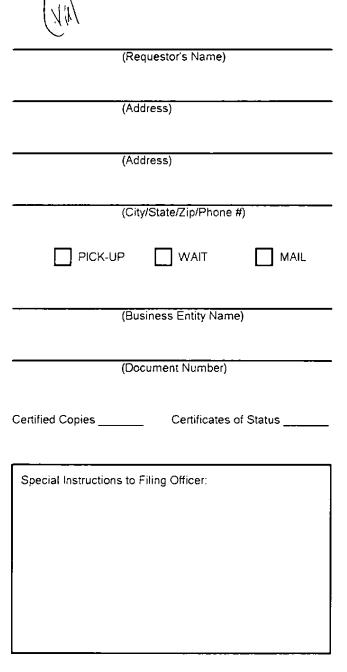
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## **COVER LETTER**

	Registration Se Division of Cor			
en nez		4 LUNAS, LLC		
SUBJEC	: <u></u>	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	cturn all correspo	ondence concerning this matter	to the following:	
		Melanie A. McGahee, Esq	ı.	
			Name of Person	<u> </u>
		McGahee & Perez, PL		
			Firm/Company	
		417 W Sugarland Hwy.		
			Address	
		Clewiston, FL 33440		
		aluna3637@yahoo.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report r	otification)
For furth	er information c	oncerning this matter, please c	all:	
Melanie	A. McGahee		863 983-1677	
	Name o	f Person	at () Area Code Day	time Telephone Number
Enclosed	d is a check for th	ne following amount:		
	.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	Section	Street Address: Registration	Section
Division of Corporations P.O. Box 6327			Division of C The Centre o	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RANCHO 4 LUNAS, 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  $\frac{11/16/2023}{2}$ \_\_\_\_\_ and assigned Florida document number 1.23000519123 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RANCHO A, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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

## 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.

Cuv

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
		<del> </del>	□ Add
			□Remove
			□Change
			□Add
			□Remove
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		~	□Add
			□Remove
			□Remove
			☐ Change
			□Remove
			□Change

	<del></del>
	<del></del>
<u>iote:</u> If	e date, if other than the date of filing:
	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
	<b>1</b> .
l is tiled	January 5 , 2024.
d is filed	

Filing Fee: \$25.00