123000548436

(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:

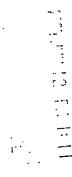




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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	dision of Cor	porations					
cup teat.	_	-					
SUBJECT:		Name of Lim	ited Liability Company				
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please returi	n all correspo	ndence concerning this matter	to the following:				
		Kenneth R. Fountain					
			Name of Person				
		Fountain Bridgford & Pora	uth	Name of Person Firm/Company Irt, Suite A Address Sy/State and Zip Code Jused for future annual report notification) 850 939-3535 at (
			Firm√Company				
	Name of Person						
			Address				
		Navarre, Florida 32566					
			City/State and Zip Code				
		_					
				otification)			
For further i	nformation c	oncerning this matter, please ca	all:				
Kenneth R.	Fountain		850 939-3535				
	Name o	f Person	Area Code Dayt	ime Telephone Number			
Enclosed is:	a check for th	ne following amount:					
■ \$25.001	Filing Fee		Certified Copy	Certificate of Status & Certified Copy			
	illing Addres						
	gistration S		•				
	Vision of C D. Box 632	orporations 7	The Centre of				

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Drag on Butterfly Properties, LLC			
(Name of the Lim	ted Liability Compa. (A Florida Limited L	ny as it now appears on our rec liability Company)	ords.)
The Articles of Organization for this Limited L	iability Company	were filed on December 12,	and assigned
Florida document number L23000548436	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liabi	lity company here:	
The new name must be distinguishable and contain the v	words "Limited Liabil	ity Company," the designation "I	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	rable:		
Principal office address MUST BE A STREE	ET ADDRESS)		
	_		
Enter new mailing address, if applicable:			
<i>.</i>	DOM:		
Mailing address MAY BE A POST OFFICE	<u>BUA)</u>		<u> </u>
		· · · · · · · · · · · · · · · · · · ·	·
B. If amending the registered agent and/or in a second and/or the new registered office addresses.	•	ddress on our records, <u>en</u>	ter the name of the new registe
Name of New Registered Agent:	Kenneth R. Fou	ntain	
New Registered Office Address:	2045 Fountain I	Professional Court, Suite A	
new hygistated Office radices.		Enter Florida street add	dress
	Navarre	,	Florida 32566
		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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jonathan E. Woodard	4608 Sago Palm Circle	□ A oloi
		Pace, Florida 32571	□Remove
			🖬 Change
AMBR	Melissa Woodard Watson	2100 Davistown Road	□ Add
		Wendell, North Carolina 27591	□Remove
			⊟ Change
			□Add
			□Remove
			Change
			□ Add
		·	□Change
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ecord sp is filed.	pecifies a delayed	d effective da	te, but not a	an effective	time, at 12	:01 a,m. on t	he earlier of	(b) The	90th day aft	er the
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Filing Fee: \$25.00