## L23000553788

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Special Instructions to	Filing Officer:	<u></u>
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Office Use Only



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2024 FEB -8 AM II: 18

ALLAHASSEE, FLORE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : 12000000195  REFERENCE : April de ser  AUTHORIZATION :  COST LIMIT : \$ 25.00
ORDER DATE : 02/08/2024
ORDER TIME :
ORDER NO. :
CUSTOMER NO:
DOMESTIC AMENDMENT FILING
NAME: FHR Referred, LLC
EFFECTIVE DATE:
ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON:
EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 FEB -8 AM II: 18 FHR REFERRED, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) SECULIARY OF STATE TALLAHASSEE. FLORIDA The Articles of Organization for this Limited Liability Company were filed on December 15, 2024 and assigned Florida document number \_\_\_\_\_\_L23000553788 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Willow 63 FHR LLC 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 \_ 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 = Mar AMBR = Aut	nager horized Member		
Title .	Name	Address	Type of Action
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Filing Fee: \$25.00