## L24000065785

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## **COVER LETTER**

	gistration Sec vision of Corp				
SUBJECT:		Land & Lakes, LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclose	d Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	n all correspor	idence concerning this matter	to the following:		
		Gino A Taliento			
			Name of Person		<del></del>
			Firm/Company		<del></del>
		5230 Paylor Lane			<u> </u>
			Address		-12 15
		Lakewodo Ranch, FL 3424	10		
			City/State and Zip Code		
		llc@terramarkusa.com		., .	7F 35
For further	information co	e-mail address: ( oncerning this matter, please c	to be used for future annual report notificall:	CERTOR)	
Gino A Tal	iento		205 275-3444 at ( )		
	Name of	Person	Area Code Daytime	Telephon	e Number
Enclosed is	a check for th	e following amount:			
□ \$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now (A Florida Limited Liability Cor	nouv)				
The Articles of Organization for this Limited Liability Company were filed	l on February 05, 2024	and assigned			
Plorida document number L24000065785					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited limbility compositions of the limited limbility compositions. Southeast Land & Lakes Management, LLC	any here:				
The new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "LLC" or the	abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)		60 8 0 3			
		2m			
Enter new mailing address, if applicable:					
Mailing address MAY BE A POST OFFICE BOX)	2	70			
	n one monde enter the n	υ ω and the new region			
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	a our records, enter the n	and or the negroup.			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	, Florida	Ztp Code			

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, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authortzed	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			☐ Change
			□Remove
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fective date, if other than the date of filing:				(optional)		
fective date, if other than the date of filling: neffective date is listed, the date must be specific and can the listed date inserted in this block does not mee	mot be prior to d	late of filing or	more than 90 da	ys after filing.) I	ursuant to	o 605.0
cument's effective date on the Department of State	e's records.		ap redmiemer	ica, tito date w	III HOL O	e nstet
coord specifies a delayed effective date, but not an is filed.	effective time,	, at 12:01 a.m.	on the earlier	of: (b) The	90th day	after t
- 1 - 20						
ted, 2	2024					
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Typed or printed name of signee