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04/30/24--01009--011 **25.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Rancy Development Group LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
James Ryan Raney Name of Person
Rancy Development Group
3170 NE 106th ST
Anthony FL 32617 CityState and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Somes Ryan Raney at (352) 598-5817 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status & Cert

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Rangy Develope	Minit Group LLC B Liability Company as it now appears on our records.) Florida Limited Liability Company)	
び(<u>Name of the Limited</u> (A	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
	bility Company were filed on 3/4/2024	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicat	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo		
B. If amending the registered agent and/or reg agent and/or the new registered office address	gistered office address on our records, <u>enter the nam</u> <u>here</u> :	e 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
M6R	James Ryan Raney	3170 NE 106th ST Anthony FL3	DG 7 DAdd
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			□Change
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			□Remove
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Effective da	te, if other th	an the date of the late must be specifi	filing:			(optiona	d)	
Note: If the	date inserted in	this block does the Department	not meet the app	plicable statuto	ing or more than ory filing requir	90 days after fift ements, this da	ng.) Pursuant to 60 ite will not be li	15,0207 (3) sted as the
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ne record spec ord is filed.	ilies a delayed e	effective date, bu	it not an effectiv	e time, at 12:0	t a.m. on the c	artier of: (b)	The 90th day all	er the
Dated Ap	ri 23	2024	·	·				
•		7			X	1.1	2	
		//						
		Signature	of a nember or a	uthorized repres	entative of a mer	nber /		