L2400020/483

(Requestor's Name)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
appearance to a ming officer.

Office Use Only



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13. HUNTI 08/04/24

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FCGM GOLF MAN		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	(as it now appears on our records.) (bility Company)	
The Articles of Organization for this Limited Liability Company we lorida document number L24000201483	rere filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		<u>.</u>
		. · <u>. ·</u>
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		:
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	, in	S 00 0
 If amending the registered agent and/or registered office ad gent and/or the new registered office address here: 	dress on our records, <u>enter the n</u>	
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
AMBR	DODERO GONZALEZ, MARIANA	5118 N 56TH STREET STE 111 TAMPA, FL 3	33610 _{□ Add}
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ocument's effe	ective date on the D	epartment of State	e's records.		,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
record specific Lis filed.	es a delayed effectiv	e date, but not an	effective time, a	t 12:01 a.m. on t	he earlier of: (b) The 90	th day aft	er the
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