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## **COVER LETTER**

Division of Cor		•	4				
535 Ridger	point Investments, LLC		·				
SUBJECT:	Name of Lin	ited Liability Company	<del></del>				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please return all correspo	ondence concerning this matter	to the following:					
	Ashley Morris						
		Name of Person					
	535 Ridgepoint Investmen	ts, LLC					
	Firm/Company						
	566 SW Arlington Blvd, Ste 101						
	Address						
	Lake City, FL 32025						
	ashley@ridgepointdesign.c	City/State and Zip Code					
		to be used for future annual report notif	ication)				
For further information of	oncerning this matter, please c	alt:					
Ashley Morris		386 867-2231					
Name o	f Person	Area Code Daytime	Telephone Number				
Enclosed is a check for the	he following amount:						
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
No.:11: A. delues		Street Address					

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 OF

535 Ridgepoint Investments, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our record Liability Company)	<u>ls.</u> )
e Articles of Organization for this Limited Liability Company were filed on June 5th, 2024		and assigned
lorida document number L24000257556		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	oility company here:	
ne new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		2
		24
		Ė.
nter new mailing address, if applicable:		ω
Mailing address MAY BE A POST OFFICE BOX)	•	7
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. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new regist
Name of New Registered Agent:		<del></del>
New Registered Office Address:	Enter Florida street addres	
	Emer v tortaa sircet adares	13
		orida
	City	zip Couc

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.

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Effective date.	if other than the d	ate of filin	g:			(optio	nal)	
(If an effective date	if other than the d	e specific and	d cannot be pr	ior to date of fi	ing or more tha	n 90 days after f	iling.) Pursuant to (	505.0207
Note: If the dated	inserted in this bloc tive date on the Dep	k does not r artment of S	neet the app State's recor	dicable statute ds.	ory ming requ	irements, this	date will not be i	isicu as
	·							
he record specific	a delayed effective	late, but not	t an effectiv	e time, at 12:0	)] a.m. on the	earlier of: (b)	The 90th day a	fter the
ord is filed.						, ,	•	
Dated June 25th			. 2024	·				
	1/1	2			_			
	76			<u>&gt;</u>		<del> \</del>		
	* S	gnature of a	member of at	thorized repres	sentative of a n	ember		

Filing Fee: \$25.00

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
MGR	Ashley Morris	312 SW Legacy Glen	■Add
		Lake City, Fl. 32025	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
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