24000293983

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

Office Use Only



100432334271

85/85/24--01005--062 *≠₂₅.05

2024 AUG -6 AM II: 07

RECEIVED

Department of State Division of Corporations

American Expediting (Stealth Courier)

1531 Commonwealth Business Dr Suite 105 Tallahassee, FL. 32303 850-294-5632

Stealth Courier Box

Requester: Azurede Ross

Company: Edgewater Parktowne

Job# : 15436477

Date- 8/2/2024

COVER LETTER

| | gistration Se vision of Cor | | | • | | |
|------------------|---|--|--|--|--|--|
| etin Hezer. | EDGEWAT | TER PARKTOWNE IND 1 LL | С | | | |
| SUBJECT | | Name of Lim | ited Liability Company | | | |
| The enclose | d Articles of | Amendment and fee(s) are sub | mitted for filing. | | | |
| Please retur | n all correspo | ndence concerning this matter | to the following: | | | |
| | | AZUREDE ROSS | | | | |
| | | | Name of Person | | | |
| | MERIDIAN PARTNERS LAW P.A. | | | | | |
| | | | | | | |
| | | | | | | |
| | | Address | | | | |
| | | TAMPA, FL 33607 | | | | |
| | City/State and Zip Code AZUREDE@MERIDIANPARTNERSLAW.COM | | | | | |
| | | | to be used for future annual report no | uification) | | |
| For further | information c | oncerning this matter, please ca | all: | | | |
| AZUREDE | ROSS | | 813 443-5260 | | | |
| | Name o | f Person | at () Area Code Dayti | me Telephone Number | | |
| Enclosed is | a check for th | ne 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) | | |
| | ailing Addres | | Street Address: Registration S | ection | | |
| IS: | | | D: 11 | | | |

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

FILED

EDGEWATER PARKTOWNE IND 1 LLC

2024 AUG -6 AM 11: 07

| (<u>Name of the Limited Liabi</u> (A Floric | lity Company as it now appears on our r da Limited Liability Company) | ecords.) | |
|--|--|--------------------------------------|--|
| | | TALLAMASSEE, FLORIDA | |
| The Articles of Organization for this Limited Liability | Company were filed on 07/02/2024 | and assigned | |
| Florida document number L24000293983 | . | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the lin | nited liability company here: | | |
| EDGEWATER PARKTOWNE IND I LLC | | | |
| The new name must be distinguishable and contain the words "Lin | mited 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 ADD | (RESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registere agent and/or the new registered office address here: | ed office address on our records, o | enter the name of the new registered | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| New Registered Office Address. | Enter Florida street address | | |
| | | , Florida Zip Code | |
| | Cuy | Zip Code | |
| New Registered Agent's Signature, if changing Register | red Agent: | | |
| I hereby accept the appointment as registered agent | t and agree to act in this capacity | | |

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 | Membe: |

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-------------|---------|----------------|
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | Remove |
| | | | ☐ Change |
| | | | □Add |
| | | | □Remove |
| | | | □ Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | |
| | | | |
| | | | □Remove |
| | | | □ Changa |

| | | | | | | |
|--|--|---|---|---|-------------------|---------------|
| | · · | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | <u> </u> | | _ | |
| | | | | | | |
| | | | | | | |
| | | | - | | <u> </u> | . |
| | | | | | | |
| | | | | <u> </u> | | |
| | | | | | <u> </u> | 2024 AUG |
| | | | | | LAWASSEE, FLORIDA | AUG . |
| | | | · · · · · · · · · · · · · · · · · · · | - | 2 | 1-6 |
| | | | | | <u> </u> | MH11: 08 |
| | | | | | <u></u> | _= |
| | | | | | 0,3,0 | 80 |
| | | | | | | |
| | | | | | | |
| • | | | | | | |
| | | | | | | |
| fective date, if other than the n effective date is listed, the date mus | date of filing: | | | (opti | onal) | 4.D5 D30 |
| n effective date is listed, the date mus ote: If the date inserted in this bl | the specific and car ock does not mee | nnot be prior to da t the applicable | te of filing of mor statutory filing | e than 90 days after requirements, thi | is date will no | t be listed a |
| cument's effective date on the De | partment of State | e's records. | | | | |
| | | | | | | |
| | e date, but not an | effective time, | it 12:01 a.m. or | the earlier of: (t | o) The 90th c | lay after the |
| | | | | | | |
| | | | | | | |
| is filed. | : | 2024 | | | | |
| is filed. | : | 2024 | | | | |
| ecord specifies a delayed effectivis filed. AUGUST 2 | Signature of a mer | Jun | | | | |

Filing Fee: \$25.00