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Office Use Only



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COVER LETTER

304 VANTA	AGE POINT LANE, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ERIC MORGAN		
		Name of Person	
		Firm/Company	
	2065 MORRIS ST		
		Address	
	EUSTIS, FL 32726		
		City/State and Zip Code	
	ERIC@MORGANSTAFFI		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please ca	all:	
ERIC MORGAN		850 445-1300 at ()	
Name o	f Person	at () Area Code Daytim	te Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	<u>s:</u>	Street Address:	

Registration Section Division of Corporations P.O. Box 6327

Registration Section

Division of Corporations

TO:

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

304 VANTAGE POINT LANE, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records Liability Company)	<u>.</u>)
The Articles of Organization for this Limited Liability Compan	y were filed on JULY 10, 2024	and assigned
Florida document number L24000308015		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<u> 2021</u>
		F 6
Enter new mailing address, if applicable:		S. D
Mailing address MAY BE A POST OFFICE BOX)	·····	DI,
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B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter t	the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida
	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
MGR	ERIC MORGAN	2065 MORRIS ST EUSTIS FL 32726	≅ Add
			□Remove
			□Change
MGR	TEMPERINCE MORGAN		□Add
			■Remove
			□Change
			□Add
			🗆 Remove
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			□Change

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te: If the date inserted in this	iust be specific and cannot be prior to da	(optional) te of filing or more than 90 days after filing.) statutory filing requirements, this date w	Pursuant to 605.0207 vill not be listed as
ecord specifies a delayed effect is filed.	ive date, but not an effective time, a	at 12:01 a.m. on the earlier of: (b) The	90th day after the
9/18 ted	2024/		
	+		

Typed or printed name of signee