L24000445444

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2024 NOV 13 PM 8: 21 SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

Registration Section

:O:

Div	ision of Corp	oorations				
UDICOT	Lazy S. Farn	n Airport, LLC				
UBJECT:		Name of Lin	nited Liability Company			
The enclosed	d Articles of A	Amendment and fee(s) are sub	omitted for filing.			
lease return	all correspon	dence concerning this matter	to the following:			
		Summer L. McLaughlin				
			Name of Person			
		Grunder & Petteway, P.A.				
			Firm/Company			
		23349 NW CR 236, Ste. 1	0			
			Address		202 SE	
		High Springs, FL 32643			CRE	9.97
		summer@grunder-petteway	City/State and Zip Code		2024 NOV 13 PM 8: 21 SECRETARY OF STAT TALLAHASSEE, FL	,
		-	to be used for future annual report notifica	tion)	SE PR	1
or further ir	nformation co	ncerning this matter, please c	all:		8: 2 STAT E, FL	C
Summer L. M	McLaughlin		386 454-1298 x 226	i	₩ -	
	Name of	Person		elephone Number	_	
Enclosed is a	check for the	following amount:				
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop tadditional copy	f Status & py	
Reg Div P.C	iling Address: gistration Se vision of Co D. Box 6327 lahassee, FI	ection rporations	Street Address: Registration Section Division of Corporate Centre of Tall 2415 N. Monroe S	rations ahassee		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lazy S Farm Airport, LLC (Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 10/18/2024 _ and assigned Florida document number $\frac{1.24000445444}{1.24000445444}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC," Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_, Florida _

f 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>Γitle</u>	Name	Address	Type of Action
MBR	Suzanne B. Young	918 SW Rasberry Ct.	
		Ft. White, FL 32038	■Remove
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		<u> </u>	□Remove
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ctive date, if other than the da	te of filing:		(optional)	
effective date is listed, the date must be !! If the date inserted in this block	specific and cannot be prior to does not meet the applicab	date of filing or more that le statutory filing requ	in 90 days after filing. iirements, this date) Pursuant to 605.020 will not be listed a
iment's effective date on the Depa	rtment of State's records.	,	2,	
ord specifies a delayed effective da filed.	ate, but not an effective time	e, at 12:01 a.m. on the	earlier of: (b) Th	e 90th day after the
d	20024			
<u> </u>		. -		
	nature of a member op authoris			