124000448226

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SECNLIATY OF STA

COVER LETTER

TO: Registration Se Division of Cor			
	h Road, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Chelsea Armistead		
		Name of Person	
	LF Holdings		
		Firm/Company	
	3811 Bedford Avenue, Su	ite 102	
		Address	
	Nashville, TN 37215		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	Code annual report notification) 557-7310 Daytime Telephone Number g Fee & S60.00 Filing Fee, Opy Certificate of Status &
	ca@lfholdings.us	to be used for future annual report pari	figuriary.
For further information c	oncerning this matter, please c	·	icanon)
Emily Means		615 557-7310 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

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 2024 OCT 31 PM 1: 07

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

43 N. Beach Road, LLC				
(Name of the Limi	ted Liability Company as it o (A Florida Limited Liability C	ow appears on our records.) company)		
The Articles of Organization for this Limited I Florida document number L24000448226		ed on October 21, 2024	and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name c</u>	of the limited liability cor	npany here:		
The new name must be distinguishable and contain the	words "Limited Liability Comp	any," the designation "LLC" or the c	abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>			
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office address	on our records, enter the na	me of the new registere	
-	7901 4th Street North, 5	Suite 300		
New Registered Office Address:	Enter Florida street address			
	St. Petersburg	, Florida ³	3702	
	Cuț		Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg- being filed to merely reflect a change in the company has been notified in writing of thi	per and complete perfor gistered agent as provide e registered office addre:	mance of my duties, and I am ad for in Chapter 605, F.S. O	ı fami lier with o nd r, if th u s document is =	
	/s/ David	Roberts aistered Agent, Signature of New I	Consiste and objects as	

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

. . .

Title	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□ Change
			🖸 Add
			□Remove
			□Change
			□Add
			□Remove
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			□Remove
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Effective date, if other than the offen effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	the specific and ock does not r	deannot be prior incet the applica	to date of filing or able statutory fil	more than 90 days a	otional) fter filing.) Purs this date will i	uant to 60 101 he li:)5.0207 (. sted as th	3)(b 10
he record specifies a delayed effective ord is filed.	e date, but not	an effective tii	ne, at 12:01 a.n	i. on the earlier of	(b) The 90t	h day aft		
Dated October 24		2024				SECRE	2024 OCT 3 I	
/s/ Talbou Ottinger							131	
	Signature of a	member or autho	rized representati	ve of a member		3388) 40 A	PH	
Talbott Ottinger		Tunad or prints	d name of signee			S	 0	

Filing Fee: \$25.00