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COVER LETTER

	Registration S Division of Co			
SUBJEC		RY CLUB, ELC, A FLORIDA		PANY
SUBJEC	. 1:	Name of Lin	nited Liability Company	
The enclo	osed Articles o	f Amendment and feets) are sub	omitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		Vanessa M. Bertran		
			Name of Person	
		Agentis, PLLC		
			Firm Company	
		45 Almeria Avenue		
			Address	
		Coral Gables, FL 33134		
		vmb@ agentislaw.com	City/State and Zip Code	
For furthe	er information :	E-mail address: (concerning this matter, please c	to be used for future annual report all;	(notification)
Vanessa	M. Bertran		305 722-200	
	Name	of Person	at () Area Code — Da	ytine Telephone Number
Enclosed	is a check for t	the following amount:		
■ \$25,0	00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)
	Mailing Addre Registration		Street Address	
	Division of 0	Corporations		Corporations
į	P.O. Box 63.	27	The Centre	of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1 COUNTRY CLUB, LLC, A FLORIDA				
(<u>Name of the Limited Liah</u> (A Flor	b <mark>ility Company</mark> as rida Limited Liabil	it now appears on only ty Company)	odr records.)	······································
The Articles of Organization for this Limited Liability Florida document number 1.24000463564	y Company were	2 filed on 10/31/20	124	and assigned
This amendment is submitted to amend the following:	:			
A. If amending name, enter the new name of the li	imited liability	company here:		
1 COUNTRY CLUB, LLC				
The new name must be distinguishable and contain the words "L	amited Liability Co	ompany," the designa	tion "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	·	·	-	
(Principal office address MUST BE A STREET ADI	DRESS)			
	_			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			<u></u>	-
B. If amending the registered agent and/or register agent and/or the new registered office address here		ess on our record	ls, <u>enter the name</u>	of the new registered
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Florida str	eet address	
			Florida	
	(City		Zip Code
New Registered Agent's Signature, if changing Register	red Agent:			
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered heing filed to merely reflect a change in the registe company has been notified in writing of this change	l complete perf agent as provi red office addi	ormance of my d ded for in Chapt	uties, and I am fa er 605, F.S. Or, ij	miliar with and this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			⊒Add
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
		 	⊒Add
			□Remove
			□Change
			□Remove
			□Change
			= Remove

Effective date, if other than the date of filing: [In a clicitive date is listed, the date must be specific and came be prior to date of filing or more than 9) days after filing.) Pursuant to 915,920 Mart. [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted a document's effective date on the Department of State's records, or records specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day after the rd is filed. November 12 2024 Signature of structure or authorized representative of a member. Vanessa M. Bertran						
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