Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HAND ARENDALL HARRISON SALE LLC

Account Number : T20190000128 Phone : (850)769-3434 : (251)544-1643 Fax Number

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BERNINGER FAMILY 6110

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Docusign Envelope ID, C8CCEE98-F139-4AC8-AF8F-48E83F13EAA0 COVER LETTER

	istration Sect ision of Corpe				
alin inom		R FAMILY 6 LLC			
SUBJECT		Name of Lim	ted Liability Company		
The enclosed	l Articles of A	mendment and fee(s) are subt	nitted for filing.		
Please return	all correspond	dence concerning this matter	to the following:		
		DION J. MONIZ, ESQ.			
			Name of Person	······································	
		HAND ARENDALL HAR	RISON SALE		
			Firm/Company		
		35008 EMERALD COAST	PARKWAY, SUITE 50	00	
			Address		
		DESTIN, FLORIDA 32541			
			City/State and Zip Code		
		dmoniz@handfirm.com E-mail address: (t	FLORIDA 32541 City/State and Zip Code sandfirm.com E-mail address: (to be used for future annual re	report notification)	
For further in	formation con	cerning this matter, please ca		•	
Jessica Medi	na		850 650 ai ()	0-0010	
	Name of P	erson	Area Code	Daytime Telepho	one 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 fadditional copy is enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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 Docusign Envelope ID: C8CCEE98-F139-4AC8-AF8F-48E83F13EAA0

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

BERNINGER FAMILY 6 LLC		
(Name of the Limited Liability Company as it now appears on o (A Florida Limited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability Company were filed on 11/4/202	4 and assig	gned
Florida document number L24000465562		
Florida document number	٧	283
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limited liability company here:		
		100
The new name must be distinguishable and contain the words "Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.	.c." = .
The new manie most be distinguishable and definition in the state attending a surprise and a series	***	ماسد مارا
Enter new principal offices address, if applicable:		·
, 11		ن
		
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:		
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 record		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our record		
Enter new mailing address, if applicable: [Mailing address MAY BE A POST OFFICE BOX] 3. If amending the registered agent and/or registered office address on our record agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	s, enter the name of the new	
(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 record agent and/or the new registered office address here: Name of New Registered Agent:	s, enter the name of the new	

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 Changing Registered Agent, Signature of New Registered Agent

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11 amenuing Authorized rerson(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	Name	Address	Type of Action
AMBR	KATI BERNINGER	11026 EAST EIGHT MILE ROAD	□Add
		STOCKTON, CALIFORNIA 95212	Remove
			□Change
AMBR	DARREN BERNINGER	11026 EAST EIGHT MILE ROAD	□Add
		STOCKTON, CALIFORNIA 95212	= Remove
			Change
MGR	KATI BERNINGER	11026 EAST EIGHT MILE ROAD	≅ Add
		STOCKTON, CALIFORNIA 95212	□Remove
			□ Change
MGR	DARREN BERNINGER	11026 EAST EIGHT MILE ROAD	🚊 Add
		STOCKTON, CALIFORNIA 95212	□Remove
			UChange
			□Remove
			□ Adđ
			□Remove
			Change

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18505025895	From: Jessica Medina
H240003	3744983

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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 dee: If the date inserted in this block does not meet the applicable statutory filing requirement of State's records.	_ (optional) lays after filing.) Pursuant to 6 ents, this date will not be li	05.020 isted as
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies filed.	er of: (b) The 90th day af	iter the
11/11/2024 ed		
Signature of a member or authorized representative of a member		
-		

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Filing Fee: \$25.00