L25000 306690

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #)	<u> </u>
PICK-UP	WAIT	MAIL
(Bi	usiness Entity Name)	
(50	isiness Littly Name,	
(De	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

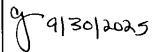




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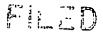
COVER LETTER

TO:

TO: Registration Sec Division of Corp			
SUBJECT: 270 DOCKS	SIDE VILLAGE LLC		
		ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Thomas S. Gibson		
		Name of Person	
	Rish & Gibson, P.A.		
		Firm/Company	
	116 Sailors Cove Dr		
		Address	
	Port St. Joe, FL 32456		
		City/State and Zip Code	2
	tgibson@psjlaw.com		
For further information co	e-mail address: (to be used for future annua	п тероп пописацоп)
Thomas S. Gibson Name of	Darcan	at (<u>850</u>) <u>2</u> Area Code	29-8211 Daytime Telephone Number
Name of	r C150u	Area Code	Daytime Telephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is e	Certificate of Status &
Mailing Address Registration S	ection	Regist	Address: ration Section
Division of Corporations P.O. Box 6327			on of Corporations entre of Tallahassee
Tallahassee, FL 32314			N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



270 DOCKSIDE VILLLAGE LLC

2025 AUG 15 PH 12: 49

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on July 2, 2025 and assigned Florida document number <u>L250003</u>06690 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 270 DOCKSIDE VILLAGE LLC 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 ___, Florida ___

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

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

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Note	tive date, if other than the date of filing:
f the rece ecord is	ord 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 filed.
Date	August II 2025
	Signature of a member or authorized representative of a member
	Thomas S. Gibson
	Typed or printed name of signee