M19000003295

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Name)		
(Do	ocument Number)			
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				

Office Use Only



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July 21, 2022

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Windkiss Ranch, LLC

M19000003295

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

Lawn & LeBlanc, PLLC 5070 Highway A1A, Suite 221 Vero Beach, FL 32963

For further information, please do not hesitate to contact Stephanie LeBlanc at 772-231-1212.

Sincerely,

Stephanie M. LeBlane, J.D., LL.M. in Taxation

For the Firm

Enclosure: Check (#1167) for \$25.00 Filing Fee



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Name of limited liability Company as it appears State: Windkiss Ranch, LLC	on the records of the Florida Department of
	7745 POLO SQ
(Principal office address MUST BE A STREET ADDRESS)	7745 POLO SQ Vero Beach, FL 32968
(Mailing address	M19000003295
2. The Florida document number of this limited liab	pility company is: M19000003295
3. Jurisdiction of its organization: Montana	112-112-112-112-112-112-112-112-112-112
4. Date authorized to do business in Florida: April	2, 2019
SECTION 11 (5-9 complete only the applicable c	changes)
5. New name of the limited liability company: (must	contain "Limited Liability Company," "L.L.C.," or "LLC.")
	for the purpose of transacting business in Florida and attach a laging members adopting the alternate name. The alternate name con "LLC.")
registered agent and/or the new registered office ad	
Name of New Registered Agent:	<u>knet Jansen</u> (aka Janet MacLean Jansen
New Registered Office Address: 8	360 Sego Lane
	360 Sego Lane Enter Florida Street Address Vero Beach City Florida Street Address Zip Code
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper a and accept the obligations of my position as registe	gistered Agent: It and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with arred agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited

If Changing Registered Agent, Signature of New Registered Agent

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
Title/ Capacity	<u>Name</u>	Address	Type of Action		
			□Add		
			□Remove		
			□Add		
			SHONE WHARSEE. F		
			PR F		
			□Add		
			Remove		
			🗀 Add		
aforementioned am	icate, if required: no more than 90 da lendment(s), duly authenticated by th he law of which this entity is organiz	e official having custody of records in the	□Remove		

Filing Fee: \$25.00

Typed or printed name of signee