partment of \$556 121000

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number: I19990000006

Phone : (407)425-7010

Fax Number : (407)425-2747

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

Email Address: CORPORATE@ZKSLAWFIRM.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PMF OCALA I LLC

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Corporate Filing Menu

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COVER LETTER

	ition Section i of Corporations	
	F OCALA I LLC	
SUBJECT:	Name of Lim	nited Liability Company
The enclosed Arti	icles of Amendment and fee(s) are sub	bmitted for filing.
Please return all o	correspondence concerning this matter	r to the following:
	N. DWAYNE GRAY, JR	, ESQUIRE
		Name of Person
	ZIMMERMAN KISER S	SUTCLIFFE, P.A.
		F:rm/Company
	315 E ROBINSON STR	REET, SUITE 600
		Address
	ORLANDO, FL 32801	
		C:ty/State and Z:p Code
	CORPORATE@ZKSLA	(to be used for future annual report notification)
r califo		
	mation concerning this matter, please of	
BARBIE A. BL		407 425-7010 at ()
	Name of Person	Area Code Daytime Telephone Number
Enclosed is a che	eck for the following amount.	
■ \$25.00 Filing	g Fee S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Regist Division P.O. E	2 Address: tration Section on of Corporations Box 6327 tassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

(((H210000869173)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



PMF OCALA I LLC

(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 Compar	ny were filed on 02/2	26/2021	and assigned
Florida document number L21000085856			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company her	<u>'e</u> :	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the de	signation "LLC" or the ab	breviation "L.L.C."
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 offic agent and/or the new registered office address here:	e address on our re	cords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
		da street address	
	City	, Florida	Zıp Code
New Registered Agent's Signature, if changing Registered Age	•		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compleacept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	agree to act in this c ete performance of as provided for in C	my duties, and Lam j Thapter 605, F.S. Or,	iamitiar with and if this document is
IFC	hanging Registered Ag	ent, Signature of New Re	gistered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SORO CAPITAL PARTNERS LLC	PO BOX 1888	□Add
		WINTER PARK, FL 32790	≅Remove
			Change
MGR	PMF NORTH CENTRAL FLORIDA LLC	315 E ROBINSON ST. STE 600	= Add
		ORLANDO, FL 32801	□Remove
			□Change
			□Add
			Chamge Chamge
			Remove
			Change
		Remove	
			Change
			□Add
			□Remove
			□Change

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Tactive date if other th	an the date of fil	ling:		(optio	nal)
Tective date, if other than effective date is listed, the ote: If the date inserted incument's effective date of	r this block does no	ot meet the applie	to date of filing or mo able statutory filing	re than 90 days after :	himg) Pursuant to 605 020
record specifies a delayed is filed.					
MARCH 3		2021	·		
,e [,]	gan,		_		

 $(((H21000086917\ 3)))$

Filing Fee: \$25.00

Typed or printed name of signee