

L21000501008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

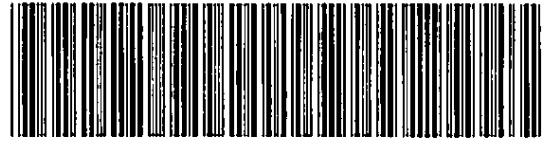
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/02/22--01027--003 **25.00

22 FEB -2 PM 3:22

T. MATTHEWS

FEB 10 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 57 Acres
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ricardo A Jones
Name of Person

Firm/Company

2395 Old Pine Trail
Address

Fleming Island, FL, 32003
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ricardo Jones at (904) 735-3435
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$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

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

57 Acres LLC

22 FEB -2 PM 3:22

(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 Nov. 22, 2021 and assigned Florida document number L21000501008.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

~~2395 Old Pine Trail Suite 100
Fleming Island, FL 32003~~

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2395 Old Pine Trail Suite 100
Fleming Island, FL 32003

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: _____

2395 Old Pine Trail Suite 100
Enter Florida street address
Fleming Island, Florida 32003
City Zip Code

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 Changing Registered Agent, Signature of New Registered 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>	<u>Address</u>	<u>Type of Action</u>
<u>owner</u>	<u>Lashante S. Jones</u>	<u>3782 Beverly Avenue</u>	<input type="checkbox"/> Add
		<u>Jacksonville, FL 32208</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>owner</u>	<u>Lamar R Jones</u>	<u>457 E 23rd Street</u>	<input type="checkbox"/> Add
		<u>Jacksonville, FL, 32206</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>owner</u>	<u>Rishawn L Jones</u>	<u>457 E 23rd Street</u>	<input type="checkbox"/> Add
		<u>Jacksonville, FL, 32206</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

PLEASE REMOVE 3 owners / members
Lashante S Jones, Lamar R Jones, and
Rishawn L Jones!

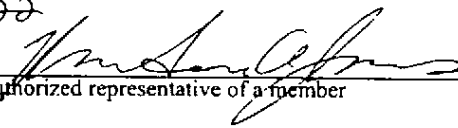
Please disregard the address change, please
remove 3 owners, from above, from 57 Acres
LLC records! Thank You!

E. Effective date, if other than the date of filing: 02/04/2022 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 01/31/2022, January 31st 2022


Signature of a member or authorized representative of a member

Ricardo A Jones
Typed or printed name of signee