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COVER LETTER

TO:

Registration Section Division of Corporations

BANY SUBJECT:	AN SOBER LIVING III LLC	•	
SUBJECT:	Name of Li	mited Liability Company	
The enclosed Articl	es of Amendment and fee(s) are so	ubmitted for filing.	
Please return all cor	respondence concerning this matte	er to the following:	
	EDWARD L MYRICK .	JR	
		Name of Person	
		Firm/Company	
	1255 W ATLANTIC BL	VD, #314	
		Address	
	POMPANO BEACH, FL	. 33069	
		City/State and Zip Code	
	SMINTZ@BANYANCE		
	E-mail address	: (to be used for future annual report not	ification)
For further information	tion concerning this matter, please	call:	
EDWARD L MYR	ICK JR	954 784-3298 at ()	
N	ame of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check	for the following amount:		
□ \$25.00 Filing F	ee S30.00 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)
Division P.O. Box	ion Section of Corporations	Street Address: Registration So Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BANYAN SOBER LIVING III 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 Company were filed on $\frac{06/03/2013}{1}$ and assigned Florida document number 1.13000079604 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 area 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.

City

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>	Address	Type of Action
MGRM	BANYAN SOBER LIVING LLC	950 N Federal Highway #115	
		115	\ \exists Remove
		POMPANO BEACH, FL 33062	□Change
MGR	JOSEPH TUTTLE	950 N Federal Highway #115	□Add
		115	☐Remove
		POMPANO BEACH, FL 33062	= Change
			o_□Add
			TALLE DE move
			SECRETARY OF STALL MUNICIPAL FI
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Effective date, if other	the date must be s	pecific and	cannot be prior	to date of filing	or more than 9	0 days after fil	ing.) Pursuant to 6	05.0207 (
Note: If the date insert document's effective date					tiling require	ments, this d	ate will not be li	sted as t
ne record specifies a dela ord is filed.	yed effective date	e, but not a	an effective t	ime, at 12:01	a.m. on the ea	rlier of: (b)	The 90th day af	ter the
DECEMBER 10	,		2 019					
Dated		· · · · · · · · · · · · · · · · · · ·	<i></i>		_			
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Filing Fee: \$25.00

Typed or printed name of signee