## L18000267445

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TO: Registration S Division of Co		,	•	
	mocks, LLC			
SUBJECT:	Name of Lin	nited Liability Company	<del></del>	
The enclosed Articles of	f Amendment and fec(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Richard Grissom			
		Name of Person		
	R&R Hammocks, LLC			
	<del></del>	Firm/Company		
	1961 SE Bowie Street			
		Address		
	Port Saint Lucie, FL 3495	2		
		City/State and Zip Code		
	richgrissom@icloud.com	to be used for future annual report n		
For further information of	concerning this matter, please of	•	onneation)	
Richard Grissom		561 578-0760 at ( )		
Name o	of Person		time Telephone Number	
Enclosed is a check for the	he 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 Addres		Street Address:		
Registration S Division of C		Registration Section Division of Corporations		
P.O. Box 632		DIVISION OF C	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION OF

R&R Hammocks, 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 November 15, 2018 and assigned Florida document number L18000267495 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: R&R Grissom LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 1961 SE Bowie Street Enter new principal offices address, if applicable: Port Saint Lucie, FL 34952 (Principal office address MUST BE A STREET ADDRESS) PO Box 1255 Enter new mailing address, if applicable: Jensen Beach, FL 34958 (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 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

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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(If an effective Note; If the	date, if other than the date of filing:  July 15, 2023  (optional)  The 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)(3) and the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
f the record b) The 90	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: the day after the record is filed.
Dated July	15, 2023
Ċ	Dichard trison
	Sugnature of a member or authorized representative of a member
	Richard Grissom
	Typed or printed name of signee