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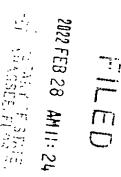
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MAR OF 2027

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	DAWG	PENN 1233, LLC				
		Name of Lim	ited Liability Company			
The enclosed A	rticles of	Amendment and fee(s) are sub	mitted for filing.			
Please return al	l correspo	ndence concerning this matter	to the following:			
		DAVID RICH,				
			Name of Person			
	SOUTHERN BUSINESS CONSULTING INC.					
			Firm/Company			
	321 E. MAIN STREET					
	Address					
	CANTON, GA 30114					
	City/State and Zip Code					
			@SOUTHERNFIRM.COM			
		E-mail address: ()	to be used for future annual	report notification)		
For further info	rmation c	oncerning this matter, please ca	all:			
DAVII	RICH		770	284-5684		
	Name o	f Person	at () Area Code	Daytime Telephone Number	<u> </u>	
Enclosed is a cl	neck for th	ne following amount:				
2 \$25.00 Fili		☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end	Certificat closed) Certified	e of Status &	
Regis Divis P.O. I	Box 632	Section orporations	Divisio The Ce 2415 N	ddress: ration Section on of Corporations entre of Tallahassee I. Monroe Street, Suite 8 assee, FL 32303	10	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PILED 2022 FEB 28 AMIL: 24 DAWG PENN 1233, 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 _-01/24/2022 Florida document number _ L22000043207 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 "LLC." 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 reet address 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added of removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	KIMSEY RUGGIERO	5743 HYDRANGEA CIRCLE	Add
		SARASOTA, FL 34238	Remove
			☐ Change
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. FEBRUARY 2, 2022

