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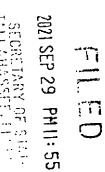
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COVER LETTER

TO: Registration Secti Division of Corpo	rations		
SUBJECT: Spire	+ AF The SWA	mA. ILC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing	
	• •	· ·	
Please return all correspond	ence concerning this matter	to the following:	
	MARCUS	C. Miller Name of Person	
		Firm/Company	
	313 Ch	esapeake Rds	
		City/State and Zip Code	
	mmiler @ 1	City/State and Zip Code City/State and Zip Code Deople S Financia La to be used for future annual report noti	Net (fication)
For further information con-	cerning this matter, please ca	all:	
MARCUS C	, Miller	at (678) 873 Area Code Daytim	3-0521
Name of Pe	erson	Area Code Daytim	e Telephone Number
Enclosed is a check for the f			
\$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)
Malling Address: Registration Sec	ntion	<u>Street Address:</u> Registration Se	otion
Division of Cor		Division of Cor	
P.O. Box 6327		The Centre of T	Tallahassee
Tallahassee, FL	32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 SEP 29 PM 11:55

Spirit of the S	SECRE IARY OF STATE TALE AHASSEE, FE OF STAT
	Company were filed on 1/31/2008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lir Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD.	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 313 Ches Aperka Rds RESSI WOODSTOCK GA 30129
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	313 Chesapeaka Rdg. Woodstock GA 30189
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, enter the name of the new registered
Name of New Registered Agent: New Registered Office Address:	hRistopher Miller 1175 OAKWOOD DRIVE Enter Florida street address
	ST CLOUD, Florida 34772 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>	Address	Type of Action
MGRM	JAMES H. CLARK	4245 STORY ROAD	□Add
		Sent Cloud, Fl. 34772	Remove
			□Change
MGRM	DeboRAH J. Clark	4245 Story Road	DAdd
		Seint Cloud, Pt. 34772	Remove
			□ Change
MGR	MARCUS C. Miller	313 Chesapeake Rds	Add
		Woodstock, GA 30189	□Remove
			□Change
MGR	Inson Todd Miller	7216 Adrienne Ave	Add
		Spring Field, VA 2215:	2_ □Remove
			□Change
			🗆 Add
			□Remove
			Change
			🗆 Add
			□Remove
			□ Change

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fan effecti Note: If t	date, if other than the date of filing: (optional) ve 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 605.02 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 's effective date on the Department of State's records.
record sp d is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	Signature of a member of authorized representative of a member
	MARCUS C. M. CLER Typed or printed name of signee

Filing Fee: \$25.00