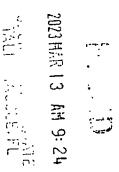
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(Requestor's Name)
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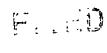
3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date: 03/13/2023

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	Acc#I201600	00072
Name:	Baker Family Investments,	LLC
Document #:		
Order #:	14836138	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of		
Apostille/Notarial Certification:	Country of Destin	
Filing:	Certified: Plain: ✓ COGS:	Email Address for Annual Report Notifications:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 25.00	

Thank you!

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION F. D OF



2623 HAR 13 AM 9: 24

Baker	Family Investments, LLC	4TI
(Name of the Limited Lia (A Flo	Family Investments, LLC bility Company as it now appears on our re rida Limited Liability Company)	ALL: COEE.FL
The Articles of Organization for this Limited Liability Florida document number 1.23000069944	2.14.70	
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l	imited liability company here:	
Shane Baker Family Investments, LLC		
The new name must be distinguishable and contain the words	.imited 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 AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registon agent and/or the new registered office address her	red office address on our records, <u>e</u>	nter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street (uldress
	City	, Florida Zip Code
	City	•

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
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Mail 1 1 KCl (a.c. Signature of a member or authorized representative of a member	
Marti Nikolaus, Authorized Person	

Filing Fee: \$25.00