## LO3000003961

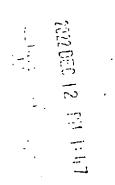
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



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## **COVER LETTER**

	gistration Se vision of Cor							
SUBJECT:	The Granite Group							
SUBJECT.		Name of Lim	ited Liability Company					
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return	n all correspo	ndence concerning this matter	to the following:					
		Timothy Gibson						
			Name of Person					
		The Granite Group						
			Firm/Company					
			: 🕽					
			Address					
		Lithia, FL 33547		-: · · · · · · · · · · · · · · · · · · ·				
			City/State and Zip Code	<del></del> -				
		tim@crossroadsace.com	to be used for future annual report no					
Una francia	afa-meion a			··				
		oncerning this matter, please c						
Tim Gibson			813 758-4296 at ()					
	Name o	f Person	Area Code Daytii	me Telephone Number				
Enclosed is	a check for ti	ne 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				
	uiling Addres	_	Street Address: Registration S	ection				
Di	vision of C	orporations	Division of Corporations					
	O. Box 632 Illahassee, l		The Centre of 2415 N. Monr.	Tallahassee oc Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Granite Group, LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 1/31/2003 and assigned
lorida document number L03000003961	
his amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liab	ility company here:
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	· 20
	2022 CC
	III
nter new mailing address, if applicable:	72
Mailing address MAY BE A POST OFFICE BOX)	7.7
	<del></del>
<ol> <li>If amending the registered agent and/or registered office a gent and/or the new registered office address here:</li> </ol>	address on our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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 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
AMBR	Andrew Atchison	PO Box 1088	<b>=</b> Add
		Lithia, FL 33547	□Remove
			□Change
AMBR	Joseph Rush	PO Box 1088	■Add
		Lithia, FL 33547	□Remove
			□Change
			QAdd  12 22 22 22 22 22 22 22 22 22 22 22 22 2
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ffective date	e, if other tha	an the date	of filing	11/30/2	022			(opti	onal)	
an effective dat fote: If the da	te is listed, the date inserted in fective date on	ate must be sp this block d	pecific and loes not m	cannot be page the ap	plicable s			90 days after	filing.) Pursua	
record specifi Lis filed.	ies a delayed e	ffective date	e, but not	an effectiv	ve time, a	: 12:01 a.n	1. on the e	arlier of: (b	) The 90th	day after the
Novemb	per 30		<u>.a</u> ,	2022						

Filing Fee: \$25.00

Typed or printed name of signee