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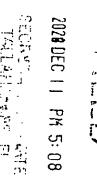
(Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
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Special Instructions to Filing Officer:	Certified Copies Certificates of Status
Special Instructions to Filing Officer:	
Special Instructions to Filing Officer:	
	Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
SUBJECT: Mac II of	Volusia, LLC		
SOBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Heidi S. Webb		
	Heidi 3. Webb	Name of Person	
	Law Office of Heidi S. W	ebb	
		Firm/Company	
	140 South Beach Street, S	stc. 310	
		Address	
	Daytona Beach, FL 32114	City/State and Zip Code	
	heidisuewebb@yahoo.com	Chystate and sap code	
	E-mail address: (to be used for future annual report notif	fication)
For further information c	oncerning this matter, please ca	all:	
Heidi S. Webb		at (<u>386</u>) <u>257-3332</u> Area Code Daytime	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne following amount:		
☐ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Section Division of Corporations		Registration Sec	
P.O. Box 632		Division of Cor The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ED

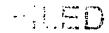
2020 DEC 11 PM 5: 08

If Changing Registered Agent, Signature of New Registered Agent

(Name of the Limited Liability Company (A Florida Limited Liab	as it now ap bility Compa	pears on our records.)	
The Articles of Organization for this Limited Liability Company w		June 9, 2004	and assigned
	rere med	24	and assigned
on Florida document number <u>L04000043703</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	tv compan	<u>y here</u> :	
The new name must be distinguishable and contain the words "Limited 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 ADDRESS)			
-			
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			
-			
B. If amending the registered agent and/or registered office adeagent and/or the new registered office address here:	dress on o	ur records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:			
	•		
New Registered Office Address:	Enter	Florida street address	
		, Florida	
	City	, - 1011011	Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformanc ovided for	e of my duties, and I an in Chapter 605, F.S. O	n familiar with and r, if this document is

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>	Name	Address 2020 DEC 11 PM 5: 08	Type of Action
MGR	Sonja C. Smith, Trustee of Sonja C. Smith Revocable	362 Riverside Drive	□Add
Trust of 2004 Dated June 9, 2004	Ormond Beach, FL 32176	□ Remove	
			□Change
			🗆 Add
			□ Remove
			□Change
		□Add	
		□Remove	
		☐ Change	
		□ Add	
		□Remove	
			□Change
		🗆 Add	
	<u> </u>	□Remove	
			□Change
		🗆 Add	
			□Remove
			□Change

If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	2029 DEC 11 PM 5: 08
	SECRETAL TRANSPORT
	
If an effecti Note: If t	date, if other than the date of filing:
ne record spord 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
Dated	December 4. 2020.
	HSVW
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Typed or printed name of signee

Filing Fee: \$25.00