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COVER LETTER

TO: Registration Sect Division of Corpo	ion orations				
SUBJECT:	Stateland &	ted Liability Company)			
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.			
Please return all correspond	dence concerning this matter t	to the following:			
	Daniel	(Name of Person)			
	Just Cond	(Firm/Company)		08 JA SEC TALL	
	Just Cond Boen ho	(Address) Acr 33433 (City/State and Zip Code)		08 JAN 28 AM 11: 59 SECRETARY OF STATE TALLAHASSEE, FLORIDI	FILED
For further information con	ncerning this matter, please ca	III:		STATE ORIDA	
Janual S (Name of	Person)	at (<u>561) 542 7-33</u> (Area Code & Daytime Te	lephone Number)	_	
Enclosed is a check for the \$25.00 Filing Fee	following amount: \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fe Certificate of S Certified Copy (additional cop	Status &	
	IG ADDRESS: ion Section	STREET/COURIER A	ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	OF		
Stateland '	Brown, LLC		
(<u>Name of the Limited Lia</u> (A Flo	ability Company as A now appears on our records.) orida Limited Liability Company)		
The Articles of Organization for this Limited Liabi Florida document number	MAILLOG	and assigned	
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the designation "	LLC" or the abbreviation	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter</u> e <u>address here</u> :	AN II:	
Name of New Registered Agent:		SET 29	
New Registered Office Address:	(Enter Florida street aa	ldress)	
. 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title Address **Type of Action** <u>Name</u> Joshua Stallander MERM ☐ Add Remove Add Remove \Box Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ignature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00