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(((H22000272287 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BAKER & HOSTETLER LLP

Account Number : I19990000077 Phone : (407)649-4016 Fax Number : (407)841-0168

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGNES SAVOL, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H22000272287 3)))

SAVOL, LLC (Name of the Limited Liability Compa (A Florida Limited)	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L05000068854	were filed on <u>07/13/2005</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	dlity company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the na	ne of the new registere
Name of New Registered Agent:		1. 22
New Registered Office Address:	Enter Florida street address	FILED SHEET
	, Florida _	
New Registered Agent's Signature, if changing Registered Agent	City <u>:</u>	ZB/Code II:
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	ree to act in this capacity. I further a e performance of my duties, and I am	gree to comply with the familiar with and

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
MGR	Raymond A. Biernacki, Jr., Trustee	2667 Enterprise Road	
		Orange City, Florida 32763	■ Remove
			Change
MGR Juddson Tyle	Juddson Tyler Spore, Trustee	854 W. Plymouth Avenue	⊞Add
		DeLand, Florida 32720	□Remove
			☐ Change
MGR Houston Travis Spore, Trustee	1402 Chesterfield Court	Add	
		Eustis, Florida 32726	□Remove
			ClAdd
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Remove

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(If an effect Note: If	e date, if other than the date of filing: [ive 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 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
ie record s ard is filed	specifies 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	A V 3 U 5 T 2
	Raymond A. Biernacki, Jr., Authorized Representative