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Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DT VILLAGES INVESTMENT LLC

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MAY 1 6 2022

K. Brumbley

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DT VILLAGES INVESTMENT, LLC		
(Name of the Limited Limbility Compa (A Florida Limited I	ny as it now appears on our records,) Labelity Company)	
The Articles of Organization for this Limited Liability Company	were filed on 01/05/2006	and assigned
Florida document number L06000001736		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
	,	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		202
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	P.O. Box 1236	
Malling address MAY BE A POST OFFICE BOX	Hecnando FL 34441	
		: 5
B. If amending the registered agent and/or registered office a seent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florido street address	
	ener rionaa sireel address	
	Cky Morids	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 Changing Registered Agent, Signature of New Registered Agent

[((H22000172139 3))]
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
М	INGRID G. MARIA VOSSEBELD	P.O. BOX 1236	
		HERNANDO, FLORIDA 34442	⊟ Remove
			Change
			□Add
			CRemove
			□Change
			□Add
			□Remove
			□Remove
			Cl Change
			DAdd
			©Remove
			Change
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<u> 1801</u> 181	Hate, if other than the date of filing:
is Med.	ecities a delayed officative date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
	12/2922
ted	
ited	Signature of a member or subtortead representative of a member

Filing Fee: \$25.00