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(Re	equestor's Name)
(Ad	dress)
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PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
, (Do	ocument Number)
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COVER LETTER

of Corpo	ion orations					
North Florida Land Holding, LLC						
	Name of Limi	ited Liability Company	.			
icles of A	mendment and fee(s) are sub-	mitted for filling.				
correspond	lence concerning this matter	to the following:				
	Randal C. Fairbanks	Name of Person ond, PL Firm/Company 400 Address 56 City/State and Zip Code (to be used for future annual report notification) call: at (
		Name of Person				
Brennan, Manna & Diamond, PL						
		Firm/Company				
	5210 Belfort Road, Suite 4	00				
		Address				
Jacksonville, Florida 32256						
	City/State and Zip Code					
	rfairbanks@bmdpl.com		,			
	·	•	lication)			
nation con	cerning this matter, please of	all;				
nks		at ()				
Name of F	'erson	Area Code Daytim	e Telephone Number			
ck for the	following amount:					
g Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy			
		Street Address: Registration Se				
	nation connaks Name of F ck for the g Fee Address:	rth Florida Land Holding, LLC Name of Lim icles of Amendment and fee(s) are subscorrespondence concerning this matter Randal C. Fairbanks Brennan, Manna & Diamo 5210 Belfort Road, Suite 4 Jacksonville, Florida 3225 rfairbanks@bmdpl.com E-mail address: (mation concerning this matter, please canks Name of Person ck for the following amount: 3 Fee \$30.00 Filing Fee & Certificate of Status Address: ration Section	Name of Limited Liability Company icles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: Randal C. Fairbanks Name of Person Brennan, Manna & Diamond, PL Firm/Company 5210 Belfort Road, Suite 400 Address Jacksonville, Florida 32256 City/State and Zip Code rfairbanks@bmdpl.com E-mail address: (to be used for future annual report not mation concerning this matter, please call: nks Name of Person Area Code Daytin ck for the following amount: g Fee S30.00 Filing Fee & Certified Copy (additional copy is enclosed) Address: Street Address:			

P.O. Box 6327 Tallahassee, FL 32314

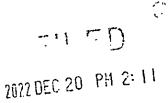
TO:

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



North Florida Land Holding, LLC

(Name of the Limited Liability Company as it now appears on our records,)) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co Florida document number	mpany were filed on Jur	ne 27, 2006 and assigned			
This amendment is submitted to amend the following:	-•				
A. If amending name, enter the new name of the limit	ed liability company he	e <u>re</u> :			
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	3128 River Vale	e Court			
(Principal office address MUST BE A STREET ADDRE	Jacksonville, Fl	Jacksonville, Florida 32207			
-	<u></u>				
Enter new mailing address, if applicable:	3128 River Vale	: Court			
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, Fl	Jacksonville, Florida 32207			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our r	ecords, enter the name of the new registered			
Name of New Registered Agent: Michae	I D. Fox				
New Registered Office Address: 3128 R	iver Vale Court				
	Enter Flor	ida street address			
Jackson	iville	, Florida ³²²⁰⁷			
	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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael D. Fox	3128 River Vale Court	
		Jacksonville, Florida 32207	□Remove
MGR Felicia O. Fox	Felicia O. Fox	3128 River Vale Court	⊟ Add
		Jacksonville, Florida 32207	5 0
			□Change
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Note: If the	date inserted in	an the date of late must be specif this block does the Departmen	not meet the ag	pplicable statu	itory filing requ	(option on 90 days after f direments, this	nal) iling.) Pursuant to date will not be	605.0207 listed as
e record spec rd is filed.	ities a delayed e	effective date, bu	it not an effect	ive time, at 12	2:01 a.m. on the	earlier of: (b)	The 90th day	after the
Dated	mber 20		, 2022	1				
_		Stenature	Celly of a member by	authorized ren	resentative of a m	nember		-
		الاستاني ال	a. a mamor pi					
	Aichael D. Fox							

Filing Fee: \$25.00