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COVER LETTER

	egistration Se ivision of Cor			
0115152VI		York Holdings, LLC		
SUBJECT	:	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please retu	rn all correspo	ndence concerning this matter	to the following:	
		Daniel York		
			Name of Person	····
		McCall and York Holdings	s, LLC	
			Firm/Company	
		309 E. Paces Ferry Road, N	NE Suite 400	
			Address	
		Atlanta, GA 30305		
			City/State and Zip Code	
		rmckinney@caliber-capital.	com	
		E-mail address: (t	to be used for future annual report notific	cation)
For further	information co	oncerning this matter, please ca	dl:	
Rocque Mo	cKinney		404 428-9911 at ()	
	Name of	i Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

McCall and York Holdings, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned Florida document number _____L07000085617 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida _

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.

Citv

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>	<u>Address</u>	Type of Action
	Daniel H. York	1801 Piedmont Road Suite 212	
		Atlanta, GA 30324	Add
		Atlanta, OA 30524	■ Remove
		 	Change
			D Add
			☐ Remove
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Dated Septemb	per 26	· · · · · · · · · · · · · · · · · · ·	2018	·					
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	TI	Signature of a	a member or aut	horized represe	ntative of a mer	nber			

Page 3 of 3

Filing Fee: \$25.00