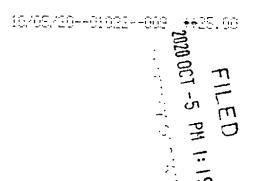
L07000120230

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COVER LETTER

	Registration Se Division of Cor		σ				
sito iez	Bridge Stre	eet Parking, LLC					
SUBJEC	T:	Name of Lim	ited Liability Company				
The enck	osed Articles of	Amendment and fee(s) are sub	mitted for tiling.				
		ondence concerning this matter	_				
		J. Russell Collins					
			Name of Person				
		Rusty Law, LLC					
			Firm/Company				
		2493 US Highway 1 South	1				
		Address					
		Saint Augustine, Florida 3	2086-6077				
		Saint Augustine, Florida 32086-6077 City/State and Zip Code					
		E-mail address: (to be used for future annual report noti	fication)			
For furth	er information c	oncerning this matter, please co	all:				
J. Russe	ll Collins		904 829-6600 at ()				
	Name o	t Person		e Telephone Number			
Enclosed	l is a check for th	he following amount:					
⊠ \$25.0	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 tadditional copy is enclosed) 			
	Mailing Addres Registration S	Section	Street Address: Registration Sec				
	Division of C	Corporations	Division of Cor	porations			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bridge Street Parking, 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 Company were filed on $\frac{12/03/2007}{1}$ and assigned Florida document number L07000120230 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 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 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, 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	Sonia, Jeffrey	21 Aviles Street	
		Saint Augustine, Florida 32084	⊠ Remove
			□Change
MGR	Vimal B. Patel	21 Aviles Street	% Add
		Saint Augustine, Florida 32084	Emove
			Change LED
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			□ Change
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		-	□Remove
			□Change

cument's effective date on the De		atotory tiling requirements, ti	iis date will not be listed a:
fective date, if other than the one offective date is listed, the date must ote: If the date inserted in this blo	be specific and cannot be prior to date	of tiling or more than 90 days after	tional) er filing.) Pursuant to 605.020
	10/02/2020		
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Filing Fee: \$25.00