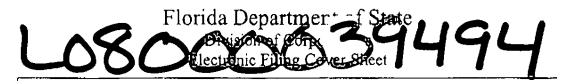
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIPP SCOTT, P.A.
Account Number : 075350000065
Phone : (954)525-7500
Fax Number : (954)761-8475

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

Email Address:____

CGC@TRIPPSCOTT.COM ---

2022 FEB 15 FM 4: 46

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company we	ere filed on APRIL 21, 2008	and assigned
Florida document numberL08000039494		
This amendment is submitted to amend the following:		
A. If amonding name, enter the new name of the limited liabilit	y company here:	
S.A.W. DEVELOPMENT, LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	obbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Malling address MAY BE A POST OFFICE BOX)		
	the second sector the se	and of the new registers
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	aress on our records, enter the m	inc of the new regioners
agent and of the new galacters		2022
Name of New Registered Agent:		? F
TARILLE OF TARM TROUBSTOCK PRESENT.		B 1
New Registered Office Address:	Enter Florida street address	
		3 B C C
	Cliv , Florida	Zip Catio
New Registered Agent's Signature, if changing Registered Agent;	•	52
I hereby accept the appointment as registered agent and agree		d

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

(((H22000060685 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 = M AMBR = A	anager uthorized Member		
Title	Name	Address	Type of Action
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