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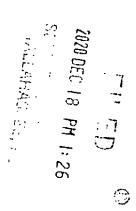
| (R | equestor's Name) | _ |
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| PICK-UP | MAIT | MAIL |
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| Certified Copies | Certificates of | Status |
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| Special Instructions to | Filing Officer: | |
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JA. 1/29/21

COVER LETTER

| TO: | Registration Sc Division of Cor | | | |
|---------|------------------------------------|--|---|--|
| SUBJI | ECT: Chris Yaze | H, LLC | | |
| | | Name of Lim | ited Liability Company | |
| The en | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please | return all correspo | ondence concerning this matter | to the following: | |
| | | Chris Yazell | | |
| | | | Name of Person | |
| | | Chris Yazell, LLC | Firm/Company | |
| | | | гиписоправу | |
| | | 799 Sterthaus Drive | Address | |
| | | Ormond Beach, FL 32174 | City/State and Zip Code | |
| | | jangregorypa@bellsouth.ne E-mail address: (| t to be used for future annual report notif | ileation) |
| For fur | ther information c | oncerning this matter, please c | all: | |
| Jan Gr | regory | | at (386) 235-4519 | |
| | Name o | f Person | Area Code Daytime | e Telephone Number |
| Enclos | ed is a check for th | ne following amount: | L63 | |
| · \$2 | 5.00 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 Addres Registration S | | <u>Street Address:</u> Registration Sec | ation |
| | Division of C | orporations | Division of Corp | |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limite | ed Liability Compa A Florida Limited | ny as it now appears on our Liability Company) | records,) | |
|--|---|---|---------------------------|------------------|
| The Articles of Organization for this Limited Li | ability Company | were filed on 10/18/2011 | am | d assigned |
| Florida document number 1.11000108646 | · | | | |
| This amendment is submitted to amend the follo | wing: | | | |
| A. If amending name, enter the new name of | the limited liab | ility company here: | | |
| • | | | | |
| The new name must be distinguishable and contain the wo | ords "Limited Liabi | lity Company," the designation | "LLC" or the abbreviation | on "L.L.C." |
| Enter new principal offices address, if applica | ıble: | Chris Yazell, LLC | | |
| Principal office address MUST BE A STREE | T <u>ADDRESS)</u> | 2189 Avacado Drive | | |
| | | Port Orange FL 32128 | | |
| | | | S # 5 | 2020 |
| Enter new mailing address, if applicable: | | 2189 Avacado Drive | E | <u> </u> |
| <u>Mailing address MAY BE A POST OFFICE I</u> | BOX) | Port Orange, FL 32128 | | |
| | | | Ç. | g .1 |
| | | | i – | [[] |
| If amending the registered agent and/or regent and/or the new registered office addres | | address on our records, | enter the name of the | <u>new regis</u> |
| generation the new registered office agores | Jacre . | | | دري. وح≽ |
| Name of New Registered Agent: | Chris Yazell | | | |
| New Registered Office Address: | 2189 Avacado | Drive | | |
| | | Enter Florida street | address | |
| | Port Orange | | _, Florida <u>32128</u> | |
| | | City | Zip (| lode - |

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> | Name | Address | Type of Action |
|--------------|--------------|--|----------------|
| MGR | Chris Yazell | 2189 Avacado Drive, Port Orange, FL 32128 | = Add |
| | | 4631 S. Atlantic Avenue, Unit 8204, Ponce Inlet. | FL 32 ■Remove |
| | | | □Change |
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| ective date, if other than the date of filing: (optional) (optional) (optional) (effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90-lays after lifing.) Pursuant to 605,0207 (3)(b) (fig. 1) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument's effective date on the Department of State's records. (cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the stilled. (cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the stilled. (cord specifies a member of authorized representative of a member | | | |
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| ective date, if other than the date of filing: (optional) (optio | _ | | |
| ective date, if other than the date of filing: | - | | |
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| te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument's effective date on the Department of State's records. Second specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the stilled. | _ | | |
| s filed. ted 12/12/20 | n effi <u>te:</u> | ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t | |
| Signature of a member or authorized representative of a member | | | |
| Signature of a member or authorized representative of a member | ted , | 12/12/20 | |
| Signature of a member or authorized representative of a member | | the Relate | |
| | | | |

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