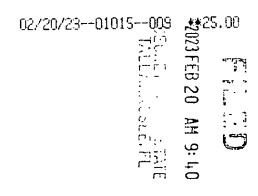
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### **WALK IN**

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XX	CERTIFIED COPY PHOTOCOPY			
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	PCB 119 LLC (CORPORATE NAME AND DOCUM	MENT #)		
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#### **COVER LETTER**

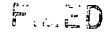
PC	3 1319 LLC		
SUBJECT:			
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	CI	narles Oster	
		Name of Person	
		PCB 1319 IIc	
		Firm/Company	
		3082 Airport Road	
		Address	
		Rockwood TN 37854	
	<del> </del>	City/State and Zip Code	
		199@yahoo.com	
	E-mail address: (	to be used for future annual report noti	lication)
For further information of	concerning this matter, please c	all:	
Charle	s Oster	at ( 239- <del>4</del> 04-6111	
Name o	f Person		e Telephone Number
Enclosed is a check for t	he 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 enclo

MAILING ADDRESS:

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



2023 FEB 20 AM 9: 40 PCB-119 LLC **PCB 1319 LLC** (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 07/20/2012 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_ and assigned L12000094059 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 3843 Heartwood LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 3843 Heartwood St. Panama City FL 32404 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 3082 Airport Road, Rockwood TN 37854 (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 \_\_\_ City

#### 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 =	<b>Authorized Member</b>

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	<del></del>	<del></del>	
		<del></del> -	□ Remove
			☐ Change
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			☐ Remove
			Change
			Remove
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	<u> </u>		□ Add
			Remove
			□ Change

D. If an	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
• •	
(If an el <u>Note:</u>	tive date, if other than the date of filing:  [Coptional]  Tective 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 (3)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
if the re (b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	,
	Charles Oster
	Signature of a member or authorized representative of a member
	Charles Oster
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00