13000074984

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Tallahassee, FL 32314

TO:

TO: Registration Sc Division of Cor			
SUBJECT: The Ordna	nce Group LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Edward Dittus		
		Name of Person	
	26Point5 LLC		
		Firm/Company	
	3630 Verna Road	_	
		Address	
	Myakka City, Florida 3425	51	
		City/State and Zip Code	
	GUNS@Myakka.com E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please ca	all:	
Edward Dittus		at (203) 725-5144	
Name of Person		Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 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		Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	and assigned
5020013	and assigned
he Articles of Organization for this Limited Liability Company were filed on 5/22/2013	
orida document number L13000074984	
nis amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here:	
6Point5 LLC	
ne new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
nter new principal offices address, if applicable:	202
Principal office address MUST BE A STREET ADDRESS)	2024 FE
THE GAL OFFICE AND THE A STREET ADDRESS	8 :
·	<u> </u>
	P
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	·
. If amending the registered agent and/or registered office address on our records, <u>enter the nam</u> gent and/or the new registered office address here:	e of the new regist
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
Florida	Zin Code

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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: __ (optional) (If an effective 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)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated February 8, 2024 ure of a member or authorized representative of a member **Edward Dittus**

Filing Fee: \$25.00

Typed or printed name of signee