LIH 000064264

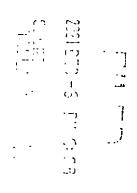
(Re	questor's Name)	
(Ad	dress)	
DA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





100377458241

12/06/21--01020--024 ++25.00



DEC 16 WI

DocuSign Envelope ID: D7D678D8-8EC8-4803-8BD6-324535399593 COVER LETTER

TO: Registration Solution of Col					
ACCCE L	LC		•		
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	Austine W. Williams				
		Name of Person			tatus &
	ACCCE LLC				
Firm/Company					
116 Oakwood Plantation Drive					
		Address	····		
	Fleming Island, FL 32003				
	austin@firstlookhomeloans	City/State and Zip Code .com			2221
	E-mail address: (to be used for future annual report notifica		ication)		. ',
For further information of	concerning this matter, please c	all:		. · :	
Austine Williams		904 863-3977 at ()			
Name o	of Person	Area Code Daytime	Telephone Number	: ::	
Enclosed is a check for t	he following amount:				
■ \$25.00 Fiting Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Fili Certificate Certified C (additional c	of Statu Copy	
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	tion		
Division of O P.O. Box 63:	Corporations	Division of Corp The Centre of T			
r.Q. box 63.	<u> </u>	THE COINTE OF T	arranassee	0	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

DocuSign Envelope ID: D7D678D8-8EC8-4808-8BD6-324535399593

New Registered Agent's Signature, if changing Registered Agent:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ACCCE LLC			
(Name of the Limited Liability C (A Florida Lin	Company as it now appears on our records.) mited Liability Company)		
The Articles of Organization for this Limited Liability Com- Florida document number $\frac{L14000064264}{L14000064264}$		and assi	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the ab	obreviation "L.1	C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	SS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, <u>enter the nan</u>	ae of the new	registere
		~ ~3	
Name of New Registered Agent:		12. [7]	~~~
New Registered Office Address:			
	Enter Florida street address	07	b
	Florida	Zip Code	7.3
	City	Zip Cŏdē CD	(م

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.

DocuSign Envelope ID: Q7D678D8-8EC8-4808-8BD6-324535399593
If amending Authorized rerson(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	<u>Address</u>	Type of Action
AMBR	Eric A. Williams	5522 Duke Road	\ \ \ \ _Add
		Jacksonville, FL 32207	■Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			☐Remove -=
			□ Change
			□Add
			□ Remove
			□ Change
			□Add
			□Remove
			□ Change

_			
_			
_			
_			
_			
_			
_			
		, -	~
_		<u> </u>	21
_		!	()
_			<u>دې _</u>
_			-
		•	ာ့ — <u>မ</u>
		·	သ
_			
f an effe <u>Note:</u>	te date, if other than the date of filing:	iling.) Pursuan	t to 605.02 be listed :
record d is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) d.	The 90th d	ay after th
	12/3/2021		
Yotad.	<u> </u>		
Dated _	CocuSigned by:		
Dated _	Cocusigned by: Enc Williams E87086FDCC214D2. Signature of a member or authorized representative of a member		

Filing Fee: \$25.00