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(Req	uestor's Name)	
. (Add	ress)	
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Sco Designment of the Limited	Liability Companial Florida Limited Lis	y as it now appears on our ability Company)	Ir records.)		
The Articles of Organization for this Limited Lia	bility Company v	vere filed on 02/03	12015	_ and assigned	i
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of t	the limited liabil	ity company here:			
The new name must be distinguishable and contain the wo	rds "Limited Liabilit	y Company," the designat	ion "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applical	ble:	2773 Po	st St.		
(Principal office address MUST BE A STREET	ADDRESS)	Jackson	ville, FC	-	
			327	205	
Enter new mailing address, if applicable:	an v	SAME	AS ABOV	<u>re</u>	
(Mailing address MAY BE A POST OFFICE B	<u>0x)</u>		· · · · · · · · · · · · · · · · · · ·	- 1	
B. If amending the registered agent and/o registered agent and/or the new registered offi			records, enter th	Ename of th	ie new
Name of New Registered Agent:	Joseph	-G. Llopiz		2	•
New Registered Office Address:	2773	Post St Enter Florida stre	ret address		
	Jacks	onville	, Florida 📆	2205	
		City		Zip 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

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager

AMBR = A	authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Jamila Douglas	250 W 62nd St	□ Add
		Jadysonville, FC	The Remove
		32208	☐ Change
MGR	Luan Paige	SAME A ABOVE	
			Remove
			Change
AMBR.	Amelia Powers	2773 Post St	😉 Add
		Jacksonville, FL	Remove
		32205	☐ Change
			Add
			☐ Remove
	 		
			□ Remove
			Change
			Remove
			☐ Change

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ective date, if other than the date of filing:	(optional)	06.00
n effective date is listed, the date must be specific and cannot be prior to date of filing of te: If the date inserted in this block does not meet the applicable statutory f		
cument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effectiv The 90th day after the record is filed.	e time, at 12:01 a.m. on the ear	lier (
ted August 8, 2015.		
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Filing Fee: \$25.00