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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (954)208-0845

Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com Plorida document number 4.15000032685	pany were filed on February 20, 2015	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
n/a		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	23505 Highway 31, Flomaton, AL 36441	
Principal office address MUST BE A STREET ADDRES	<u></u>	<u>د</u>
		2 A
Enter new mailing address, if applicable:	23505 Highway 31, Florinton, AL 36441	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		ري ري
Studing maness 212(1-6), 2(103) (2(1)(2, b)(2))		
3. If amending the registered agent and/or registered of neent and/or the new registered office address here:	fice address on our records, <u>enter the name o</u>	of the new registe
Name of New Registered Agent: n/a		
New Registered Office Address:		<u> </u>
	Enter Florida street address	
	, Florida	Zip Code

Thereby 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. Thereby confirm that the limited liability company has been notified in writing of this change.

To: Page: 4 of 5 2023-01-23 16:08:22 CST 12122023573 From, David Thomas

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>	<u>Name</u>	Address	Type of Action
MGR	Melissa Jernigan	1270 Highway 4	
		Century, FL 32535	■Remove
			□Change
MGR	Kenneth A, Jernigan	1270 Highway 4	
		Century, FL 32535	Remove
			☐ (Change
	<del></del>		🗀 Add
		<del></del>	Removed (Change)
			□Add G:
			□Change
			□Remove
			□(Thange
			□Add
		<del></del>	Remove
			□Change

Liability Company is to be a	member-managed limited liability company.		
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ective date, if other than the	date of filing:	(optional)	
te: If the date inserted in this bl	t be specific and cannot be prior to date of filing or ock does not meet the applicable statutory fil	more than 90 days after filing.) Pursuant to be listing requirements, this date will not be list	sted a
sument's effective date on the D	epartment of State's records.		
cord specifies a delayed effectiv s filed	e date, but not an effective time, at 10.01 a m	on the earber of (h). The 90th day aft	er the
January 12 ed	2023		
/s/ Ehzabeth Schneider			
	Signature of a member or authorized representati	C	