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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: ELLISON LAZENBY PLLC

Account Number : I20150000059

Phone

: (727)362-6151

Fax Number

: (727)362-6131

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

wlazenby@elattorneys.com Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NASCOTO HOLDINGS LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

To:

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| ARTICLES OF ORGAN  | HZATION  |
| OF   | The state of the s |
| <b></b>  | 1.5. The Let   |
| NASCOTO HOLDINGS LLC   |  |
| (Name of the Limited Liability Company as it no<br>(A Florida Limited Liability Co   | w appears on our records.) mpany) d on   |
| The Articles of Organization for this Limited Liability Company were file  | d on and assigned  |
| Florida document number L16000047032   |  |
| This amendment is submitted to amend the following:  | •  |
| A. If amending name, enter the new name of the limited liability com   | pany here:   |
| The new name must be distinguishable and contain the words "Limited Liability Compar   | ny," the designation "LLC" or the abbreviation "L.L.C."  |
| Enter new principal offices address, if applicable:  |  |
| (Principal office address MUST BE A STREET ADDRESS)  |  |
| Control of the Contro | - 1/10 -  |
| Enter new mailing address, if applicable:  |  |
| (Mailing address MAY BE A POST OFFICE BOX)   |  |
|  |  |
| B. If amending the registered agent and/or registered office address here:   | ress on our records, enter the name of the new   |
| Name of New Registered Agent:  |  |

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

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

Page 1 of 3

From: William Lazenby

Fax: (727) 362-6151

To:

Fax: +1 (850) 617-6383

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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          | Nascoto Enterprises, LLC | 200 Central Avenue       |   |
|              |                          | Suite 2000               | □ Remove  |
|              |                          | St. Petersburg, FL 33701 | □ Change  |
|              |                          |                          | Add   |
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