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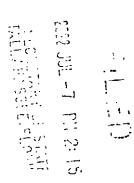
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COVER LETTER

	Registration Sec Division of Corp							
TID IF C	DJS 2, LLC		·	·				
SUBJEC	1:	Name of Lim	ited Liability Company					
The enclo	sed Articles of A	amendment and fee(s) are sub	mitted for filing.					
Please reti	urn all correspon	dence concerning this matter	to the following:					
		DAN P. HELLER, ESQ.						
			Name of Person		-			
		HELLER ESPENKOTTE	R. PLLC					
		 -	Firm/Company		- 			
		3250 MARY STREET, SU	Name of Limited Liability Company Int and fee(s) are submitted for filing. Incerning this matter to the following: P. HELLER, ESQ. Name of Person ER ESPENKOTTER. PLLC Firm/Company MARY STREET, SUITE 204 Address ONUT GROVE, FLORIDA 33133 City/State and Zip Code E-mail address: (to be used for future annual report notification) this matter, please call: at (
			•		- FLC			
		•		tification)	ت			
or furthe	r information co	ncerning this matter, please c	all:					
DAN P. I	HELLER		,					
	Name of	Person		me Telephone Numbe	T			
Enclosed i	is a check for the	following amount:						
■ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certific Certifie	ate of Status & d Copy			
	lailing Address Registration So		Street Address: Registration Se	ection				
Division of Corporations			Division of Corporations					
	P.O. Box 6327 Callahassec, F		The Centre of 2415 N. Monro	oe Street, Suite 8	310			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DJS 2, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned Florida document number _L16000092685 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TRI BAUMGARD INVESTMENTS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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, 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>	<u>Address</u>	Type of Action
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Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot Note: If the date inserted in this block does not meet the document's effective date on the Department of State's	the appli	cable stat				ng.) Pursu		
record specifies a delayed effective date, but not an ef d is filed.	ffective t	time, at 1	2:01 a.m. o	n the earlie	r of: (b)	The 90th	day afte	er the
Dated JUNE 23 20)22	<u>_</u> .						
Dated JUNE 23 20 Signature of a memb-	M	<u> </u>				•		