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Division of Corporations

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From:

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Account Number : 075350000541 Phone : (813)875-1333

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	FIND YOU		<u> </u>
(Name of the Limite	e <mark>d Liability Compa</mark> (A Florida Limited L	nv as it now appears on our r Jability (Jompuny)	ecords.)
The Articles of Organization for this Limited Li Florida document number 1.16000115473	ability Company	were filed on 06/15:2016	and assigned
This amendment is submitted to amend the following	owing:		-5
A. If amending name, enter the new name of	the limited liab	ility company here:	
N/A			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L L.C."
Enter new principal offices address, if applic	able:	17600 Silverspur Dr	
(Principal office address MUST BE A STREE		Punta Gorda, FL 33982	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	17600 Silverspur Dr Punta Gorda, FL 33982	
B. If amending the registered agent and/or in agent and/or the new registered office addre	registered office ss here:	address on our records,	enter the name of the new registered
Name of New Registered Agent:	Kun McCartne	ey	
New Registered Office Address:	17600 Silversy	our Dr	
New Registered Office rangess.		Enter Florida street	
	Punta Gorda		Florida 33982
		Cuy	Zq: Codo

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

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Trainending Authorized refson(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

Title	Name	<u>Address</u>	Type of Action
AMBR	Scott Kuby	17600 Silverspur Dr	■Add
		Punta Gorda, FL 33982	
			[] ("hange
AMBR Kim McCartney	17600 Silverspur Dr	\ \ \ \	
	Punta Gorda, FL 33982		
		■ Change	
		[].Add	
		☐Remove	
		[]Change	
		①Add	
		[]Remove	
		☐ Change	
		□Add	
		□Remove	
			Change
			Dadd
			□Remove

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N'A	other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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.ffective date, i	f other than the date of filing: N/A (optional)
I'm effective date is Note: It the date	s listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
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	Signature of a member or acceptance of a member
	Signature of a member of aerandistant epresentative of a member
	Kim McCartney