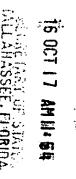
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COVER LETTER .

TO:	Registration Se Division of Cor		.·			
SUBJE		TION RIDGE, LLC				
50 50 5		Name of Lim	ited Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspo	ndence concerning this matter	to the following:			
		Robert Atkinson				
			Name of Person	-		
		Renovation Ridge; LLC				
Firm/Company						
			Address			
		Jacksonville, FL 32224				
			City/State and Zip Code			
		renovationridge@gmail.com E-mail address: (to be used for future annual report notification)				
			•	ation)		
For furt	her information c	oncerning this matter, please co	all:			
Robert Atkinson Name of Person		803 522 5276 at ()				
		f Person		Telephone Number		
Enclose	d is a check for th	ne following amount:				
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661-Executive Center CircleTallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Renovation Ridge, LLC						
(<u>Name of the Limited Ligbility</u> (A Florida Li	Company as it now appears on our records.) imited Liability Company)					
The Articles of Organization for this Limited Liability Company were filed on and assigned and assigned						
Florida document number L16000117161						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limite	d liability company here:					
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE	<u> </u>					
						
Enter new mailing address, if applicable:		- 				
(Mailing address MAY BE A POST OFFICE BOX)		An H				
		SE 17				
B. If amending the registered agent and/or register	red office address on our records, <u>e</u>	nter The name of the new				
registered agent and/or the new registered office addre	<u>ss here</u> :	RAD OF				
		:>				
Name of New Registered Agent:						
New Registered Office Address:						
	Enter Florida street address					
	, Floric					
	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, 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
AMBR	Kenneth Miller	5219 Manning Cemetary Rd, Jacks	
			□ Remove
			Change
-			Add
			Remove
			Change
			ALL (4H)
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			Change
			□ Add
			Remove
			☐ Change

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		<u> </u>			
Effective date, if other than the lift an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	oust be specific and cannot to block does not meet the	be prior to date of filing applicable statutory	or more than 90 days after	onal) r filing.) Pursuant to 605. s date will not be liste	.0207 :d as
		out not an effecti	ve time, at 12:01	a.m. on the earlie	er of
	cora is illea.				
The 90th day after the re	2016				
he record specifies a delay. The 90th day after the re Dated Oct, 8 Robert					

Page 3 of 3

Filing Fee: \$25.00