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COVER LETTER 4

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Compa	astal Reiny as it now appears on Liability Company)	our records.)	ons, LLC	
The Articles of Organization for this Limited Liab	oility Company	• •		○∫ and assig	med
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of the	he limited liab	ility company here:			
The new name must be distinguishable and contain the work Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)	de:	lity Company," the design	nation "LLC" or the	e abbreviation "L.L.	C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>9x)</u>			16 OC	
B. If amending the registered agent and/or registered agent and/or the new registered offic			r records, <u>ent</u>	ASSEMBLE OF	f the new
Name of New Registered Agent:	Leon	Russell	Lee V	Villes	<u> (</u> VC
New Registered Office Address:		Enter Florida s	treet address		
		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

Title **Address Type of Action** Name . MGR/AMBR. Tiffany Danielle Russell 52 Martinique DR PCB, FL 32413 Change owner MGRAMBR Leon Russell Lee Wilkeson. 52 Martinique DR WAdd

Panama City Beach, Fl 32413 Remove ☐ Change ☐ Add ☐ Remove AHASSEE, FLOOR 8 ☐ Change □ Add ☐ Remove ☐ Change ☐ Add □ Remove ☐ Change

If amending a	any other in	formation, enter cha	nge(s) here: (Attach	ı additional sh	eets, if necesso	iry.)		
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(If an effective dat Note: If the dat	te is listed, the oute inserted in	an the date of filing: date must be specific and can this block does not mee in the Department of State	et the applicable statut			ng.) Pursuar		
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