# 160006436

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SECRETARY OF STATE
TALLAMASSEE, FI

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: A G T V U S+	LL Company
Name of Elimeter (Jaco	inty Company
The enclosed Articles of Amendment and fee(s) are submitted for	or filing.
Please return all correspondence concerning this matter to the fe	ollowing:
Michelle	Grandins
Em Land 1	Holding LLC
2123 OHio Ave	Address
Live Oak, F	FL 32064 state and Zip Code
econo mymotors @ E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please call:	
Michelle Grandins	ar (386) 867-1384
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status C	55.00 Filing Fee &  Certified Copy  additional copy is enclosed)  S60.00 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 = 25 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MG Trust, LL	Company as it now as	magrs on our records )		
(Name of the Limited Liability (A Florida Li	imited Liability Compa	ny)		
The Articles of Organization for this Limited Liability Con Florida document number <u>L 16000164316</u>		9/01/2016	and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite  EM Land Tolding  The new name must be distinguishable and contain the words "Limited"	LLC.		he abbreviation "L.I	C."
Enter new principal offices address, if applicable:			·· <del>·</del>	<del></del>
(Principal office address MUST BE A STREET ADDRE.	<u></u>			<del></del>
	<del></del>		_	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on o	ur records, <u>enter the</u>	name of the new	registered
Name of New Registered Agent:				
New Registered Office Address:	Enter	r Florida street address		
		Florida	3	
<del></del>	City		Zip Code	
New Registered Agent's Signature, if changing Registered a	Agent:			
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nplete performanc int as provided for	e of my duties, and 1 in Chapter 605, F.S.	am <mark>īfum</mark> ilidīzviti Or <del>. if this <b>Z</b>ocu</del>	li and m <del>entri</del> s
	If Changing Registere	d Agent, <u>Signature of Ne</u> v	v Registere@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>	Address	Type of Action
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			□Remove
			□Add
			□Remove
		<del></del>	☐ Change
			□Remove
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ctive date, if other than the date of filing: 10-9-2024 (opt effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days afte e: If the date inserted in this block does not meet the applicable statutory filing requirements, that ment's effective date on the Department of State's records.	t <b>ional)</b> er filing.) Pursu nis date will no	ant to 60 ot be lis	5.0207 ted as
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ( tiled.	b) The 90th		er the
ed 10 - 9 2024	ECKE IS TALLAI	2024 OCT 11 PM 4: 3 7	en:
/V/ha/100 4	HASSEL	=	į.
Signature of a member or authorized representative of a member	<del>338</del> 0F	PK	
Michelle Graudins Typed or printed name of signee	ST ST	Ė.	€_