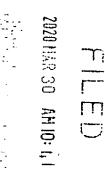
## L1700000 4019

Office Use Only



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03/30/20--01032--016 \*\*25.00



Amend

APR 1'4 2028

I ALBRITTON

## **COVER LETTER**

TO:

Tallahassee, FL 32314

|   | Registration Se<br>Division of Co |  |   |  |  |  |
|---|-----------------------------------|--|---|--|--|--|
| SUBJEC  |                                   | oundation, LLC                               | *   |  |  |  |
| SOBJEC  |                                   | Name of Lim                                  | ited Liability Company  |  |  |  |
| The encle                                     | osed Articles of                  | Amendment and fee(s) are sub                 | mitted for filing.  |  |  |  |
| Please re                                     | turn all correspo                 | ondence concerning this matter               | to the following:   |  |  |  |
|   |                                   | Brian Barnett                                |   |  |  |  |
|   |                                   |  | Name of Person  |  |  |  |
|   |                                   | The Loft Foundation, LL                      | С   |  |  |  |
|   |                                   |  | Firm/Company  |  |  |  |
|   |                                   | PO Box 236727                                |   |  |  |  |
|   |                                   |  | Address   |  |  |  |
|   |                                   | Cocoa, FL 32923                              |   |  |  |  |
|   |                                   |  | City/State and Zip Code   |  |  |  |
|   |                                   | bbarnett@a-otc.com                           |   | <del></del>  |  |  |
| For fireth                                    | ar information c                  | e-mail address: (                            | to be used for future annual report no                              | incation)  |  |  |
|   |                                   | oncerning this matter, piease co             |   |  |  |  |
| Brian Ba                                      |                                   |  | 321 704-0387<br>at ()   |  |  |  |
|   | Name o                            | f Person                                     | Area Code Daytir  | ne Telephone Number  |  |  |
| Enclosed                                      | is a check for the                | he following amount:                         |   |  |  |  |
| ₩ \$25.0                                      | 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 Addres                    |  | Street Address:   |  |  |  |
| Registration Section Division of Corporations |                                   |  | Registration Section Division of Corporations                       |  |  |  |
|   | P.O. Box 632                      |  | The Centre of Tallahassee   |  |  |  |

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| The Lott Foundation, LLC   |  |   |                                |                      |
|--|--|---|--------------------------------|----------------------|
| (Name of the Limit   | ted Liability Comp<br>(A Florida Limited | any as it now appears<br>Liability Company) | s on our records.)             |                      |
| The Articles of Organization for this Limited L Florida document number L17000004019 |  | y were filed on 01/0                        | 05/2017                        | and assigned         |
| This amendment is submitted to amend the following                                   | owing:                                   |   |                                |                      |
| A. If amending name, enter the new name o  | f the limited lial                       | bility company her                          | r <u>e</u> :                   |                      |
| N/A  |  |   |                                |                      |
| The new name must be distinguishable and contain the w                               | ords "Limited Liab                       | ility Company," the de-                     | signation "LLC" or the abbre   | eviation "L,L,C,"    |
| Enter new principal offices address, if applic                                       | able:                                    | N/A   | <del></del> -                  | <u> </u>             |
| (Principal office address MUST BE A STREE  | T ADDRESS)                               |   | در<br>مراجعه                   | 20                   |
|  |  |   | ئىرىنى <u>.</u>                | <u> </u>             |
|  |  |   |                                | 2020 HAR 30          |
| Enter new mailing address, if applicable:  |  | N/A   |                                | 1 1 1                |
| (Mailing address MAY BE A POST OFFICE)   | BOX)                                     |   |                                | = 5                  |
| -  |  |   | ,                              | - 6                  |
|  |  |   |                                |                      |
| B. If amending the registered agent and/or r   | egistered office                         | address on our rec                          | cords, <u>enter the name o</u> | of the new registere |
| agent and/or the new registered office addres  | s here:                                  |   |                                |                      |
| Name of New Registered Agent:  | N/A                                      |   |                                |                      |
| New Registered Office Address:   | N/A                                      |   |                                |                      |
| the state of the results.  |  | Enter Florid                                | da street address              | <del></del>          |
|  |  |   | Florida                        |                      |
|  | -  | 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       | <u>Name</u>      | Address                   | Type of Action  |
|-------------|------------------|---------------------------|-----------------|
| AMBR        | Brian P. Barnett | 1045 Hwy A1A, Unit 703    |                 |
|             |                  | Satellite Beach, FL 32937 | □Remove         |
|             |                  | <del>-</del>              | <b>■</b> Change |
| AMBR        | Todd R. McDowell | 118 Via De La Reina       |                 |
|             |                  | Merritt Island, FL 32953  | □Remove         |
|             |                  | <del>,</del>              | <b>■</b> Change |
|             |                  |                           |                 |
|             |                  |                           | □Remove         |
|             |                  | <del></del>               | □Change         |
|             |                  |                           | □Add            |
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| <del></del> |                  |                           |                 |
|             |                  |                           | □Remove         |
|             |                  |                           | ПС              |

| N/A<br>   |  |  | _                   |                       |                            |
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|   |  |  |                     |                       |                            |
| reffective date is listed<br>te: If the date insert | r than the date of filing<br>the date must be specific and<br>ed in this block does not not<br>te on the Department of S | d cannot be prior the meet the application |                     |                       | filing.) Pursuant to 605.0 |
| cord specifies a dela<br>s filed.                   | yed effective date, but not  | ı an effective tir                         | me, at 12:01 a.m. c | on the earlier of: (b | ) The 90th day after t     |
|   |  | 2020                                       |                     |                       |                            |
| March 26<br>ed                                      |  |  | H                   |                       |                            |
| March 26  | Signature of a   | mentoe of autho                            | rivedredresentative | of a member           |                            |

Filing Fee: \$25.00