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	(Requestor's Name)
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PłCK-UF	WAIT MAIL
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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations			
****	FLORA-BA	AMA HOLDINGS, LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.		
		ROBERT D LEE			
			Name of Person		
		FLORA-BAMA HOLDIN	GS, LLC		
			Firm/Company		
	enclosed Articles of Amendment and fee(s) are submitted for filling. ase return all correspondence concerning this matter to the following: ROBERT D LEE				
			Address		
		PINELLAS PARK, FL 33	781		<i>√</i> √ .
	FLORA-BAMA HOLDINGS, LLC Name of Limited Liability Company renclosed Articles of Amendment and fee(s) are submitted for filing. see return all correspondence concerning this matter to the following: ROBERT D LEE				
		E-mail address: (to be used for future annual report not	ification)	, ·-
For further in	iformation c	oncerning this matter, please c	all:		î :
ROBERT D.	. LEE				``)
	Name o	f Person	Area Code Daytin	ne Telephone Number	— თ
Enclosed is a	check for th	ne following amount:			
■ \$25,00 F	filing Fee		Certified Copy	Certificate of Certified Cop	Status & y
				ection	
			Division of Co	rporations	
1 al	lahassee, l	*L 32314	2415 N. Monro	be Street, Suite 810	

RECEIVED OCT 2 6 2020

Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2020

ROBERT D LEE FLORA-BAMA HOLDINGS, LLC 3750 70TH AVENUE NORTH SUITE B PINELLAS PARK, FL 33781

SUBJECT: FLORA-BAMA HOLDINGS, LLC

Ref. Number: L17000030191

We have received your document for FLORA-BAMA HOLDINGS, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 820A00025060

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORA-BAMA HLODINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compar	ny were filed on 02/09/2017	and assigned	
Florida document number L17000030191			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lis	ability company here:		
3750 HOLDINGS, LLC			
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
	·		
Enter new mailing address, if applicable:		 	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered officagent and/or the new registered office address here:	e address on our records, <u>enter the</u>	e name of the new register	<u>-ed</u>
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
<u> </u>	Floric	daZip Code	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agen	ıt:		

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 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
			□ Add
			□Remove
			☐ Change
			□Add
			☐Remove
			□Add
			□ Rетюче
			□ Change
			□Add
			Remove
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			□Add
			□Remove
			□ Change
			□ Add
			□ Remove
			☐ Change

Effective date, if other than the date of filing: ((optional) ((If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0297 (3 More: If the date inserted in his block does not meet the applicable statutory filing requirements, this date will not be listed as if document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the ord is filed. Dated OCTOBER 20 2020 Signature of a member or authorized representative of a member.	· · · · · · · · · · · · · · · · · · ·			<u></u> .				_
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Signature of a member or authorized representative of a member	Dated OCTOBER 20		2020	_ ·				
Signature of a member or authorized representative of a member	IM	2						
		Signature of a r	nember or author	orized represent	ative of a memb	er		

Filing Fee: \$25.00