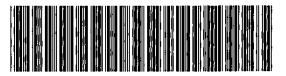
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SECRETARY OF STATE
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D. SCOTT MAY 8 2017

## **COVER LETTER**

	Registration Se Division of Cor			·		
SUBJEC		na Botanicals LLC				
COBCLC		Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub	<u>-</u>			
	v <b>u</b> m um concespe	Terese Cerna Driscoll	to me forto img.			
			Name of Person	· · · · · · · · · · · · · · · · · · ·	•	
		Surterra Holdings				
		··· ··· ·	Firm/Company	<u> </u>		
		3340 Peachtree Road		FILE OF STATE		
		Address				
		Atlanta, GA 30326		SET	j	
		City/State and Zip Code tcernadriscoll@surterraholdings.com				
			to be used for future annual report not	ffication)		
For furth	er information co	oncerning this matter, please ca	all:			
Terese C	Cerna Driiscoll		404 920.4890, e	xt. 505		
	Name of	f Person	Area Code Daytim	e Telephone Number		
Enclosed	l is a check for th	ne 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)		
	MAILI	NG ADDRESS:	STREET/COUR	IER ADDRESS:		

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SWC Deltona Botanicals 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 Company were filed on April 3, 2017 and assigned Florida document number L17000075124 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 ADDRESS) 116 East Fourth Street Enter new mailing address, if applicable: Ocilla, Georgia 31774 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	R. Jake Bergmann	3423 Piedmont Road NE, Suite 518	
		Atlanta, GA 30305	■ Remove
			☐ Change
MGR	Surterra Holdings, Inc.	1639 Village Square Blvd	Add
		Tallahassee, FL 32309	☐ Remove
			Change
			Remove
			☐ Change
			Add
			Remove
			All Add 5
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The 90th day after the r	ecora is file	J.					<b>=</b>
		2017				ETZ.	- N
April 27							• •
Dated April 27		-,	<del></del> :			SEC	5
Dated April 27		PAR	3	ntative of a memb		SEE, F	· 5 - 基

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00