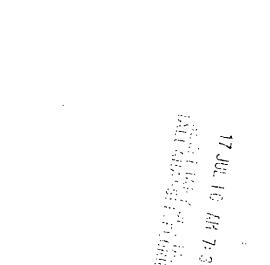
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JUL 12 2017 J CHIVERS

COVER LETTER

_	tion Section of Corporations
	nard Cannabis Center, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Arti	cles of Amendment and fee(s) are submitted for filing.
Please return all c	orrespondence concerning this matter to the following:
	Johnny R Bernard Jr.
	Name of Person
	Firm/Company
	159 Island Estates Pkwy
	Address
	Palm Coast, FL 32137
	City/State and Zip Code
	johnnybmd@gmail.com
For further inform	E-mail address: (to be used for future annual report notification) nation concerning this matter, please call:
Johnny R Bernard	d Jr. 901 301-1942
	Name of Person Area Code Daytime Telephone Number
Enclosed is a chec	ck for the following amount:
□ \$25,00 Filing	Fee S30,00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S55,00 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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)						
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L17000105697}{L}$	were filed on May 12, 2017	and assigned					
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited lial	oility company here:						
The new name must be distinguishable and contain the words "Limited Liab:	ility Company," the designation "I,I,C" or the	abbreviation "L.L.C."					
Enter new principal offices address, if applicable:	211 E. International Speedway Blvd						
(Principal office address MUST BE A STREET ADDRESS)	Ste 207	N.					
	Daytona Beach, FL 32118						
Enter new mailing address, if applicable:	211 E. International Speedway Blvd						
(Mailing address MAY BE A POST OFFICE BOX)	Ste 207						
	Daytona Beach, FL 32118						
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		er the name of the					
Name of New Registered Agent:							
	Enter Florada street address						
New Registered Office Address:							
New Registered Office Address:	, Florida	Zip Code					

If Changing Registered Agent, Signature of New Registered Agent

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. Thereby confirm that the limited liability

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

$\mathbf{AMBR} = A$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00