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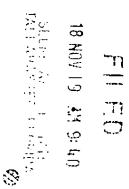
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COVER LETTER

	Registration Sec Division of Corp			
SUBJEC*		Company, LLC		
SUBJEC	ı:	Name of Limi	ited Liability Company	
The enclo	sed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please reti	urn all correspon	ndence concerning this matter	to the following:	
		Gerald F Harvey II		
		4 Elements Company, LLC	Name of Person	
		4738 Cherokee Heights Ro	Firm/Company ad	
		Panama City, Florida 3240	Address	
		support@4elementsoc.com	City/State and Zip Code	
			•	cation)
For furthe	r information co	oncerning this matter, please ca	all:	
Gerald F	Harvey II		850 819-9499 at ()	
Address Panama City, Florida 32404 City/State and Zip Code support@4elementsoc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:				
Enclosed i	s a check for th	e following amount:		
\$25.00) 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 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

4 Elements Company, LLC				
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our rec d Liability Company)	ords.)		
he Articles of Organization for this Limited Liability Compa lorida document number L17000120322	ny were filed on June 1, 2017	a	ınd assig	gned
nis amendment is submitted to amend the following:				
If amending name, enter the new name of the limited li	ability company here:			
e new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "I	.LC" or the abbrevia	tion "L.L.	.c."
nter new principal offices address, if applicable:			A	
Principal office address MUST BE A STREET ADDRESS)				*LLC.* 18 NIV 19 EY 9:10
			==:	
		3.1	9	-
nter new mailing address, if applicable:			- A	, 1
			ŵ	on "L.L.C."
Taking uddress MAT BE A FOST OF FICE BOX			- 5	
				
. If amending the registered agent and/or registered egistered agent and/or the new registered office address h		rds, <u>enter the 1</u>	name o	f the
Traine of their registered regent.				
New Registered Office Address:	Enter Florida street ade			
	City	Florida	Code	
egistered agent and/or the new registered office address have a Name of New Registered Agent:	City	Z.y.	Cince	

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
AMBR	Todd P Beasley	1350 State Park Road Chipley, Florida 32428	■ Add
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			□ Remove
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	pecifies a delay day after the re			ot an effec	tive time, at	: 12:01 a.	m. on t	the ear
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