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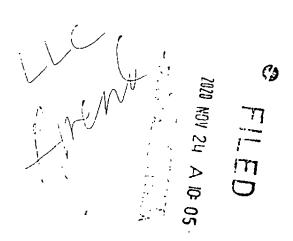
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TO:

Registration Section

Tallahassee, FL 32314

Division of Co	rporations					
SUBJECT:	BENJAMIN Y. SAX	ON II, PLLC				
SUBJECT:	Name of Lim	ited Liability Company				
The control Aminto of	Amendment and fee(s) are sub	mitted for filing				
The enclosed Afficies of	Amendment and rec(s) are suo	mitted for ming.				
Please return all corresp	ondence concerning this matter	to the following:				
	BENJAM	IN Y. SAXON III, Es	<u> </u>			
		Name of Person				
	c/o BENJA	MIN Y. SAXON II, PI	LLC			
		Firm/Company				
	lll Sout	h Scott Street				
	 	Address				
	Melbourn	e, FL 32901				
		City/State and Zip Code	<u></u>			
	bsaxon2l	aw@yahoo.com				
	E-mail address: (to be used for future annual report noti	fication)			
For further information	concerning this matter, please c	all:				
Benjamin Y. S	axon III, Esq.	at () 727-2 Area Code Daytim	2545			
Name	of Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for	the 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 Addre		Street Address:	ction			
Registration Section Registration Section Division of Corporations Division of Corpora						
	Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee					
Tallahassee,		2415 N. Monro	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

BENJAM	IN Y. SAXON II	, BITTC			
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appe a Limited Liability Company	ears on our records.)		
ne Articles of Organization for this Limited Liability C		06/05/201	7	and as	sioned
					0.5
orida document numberL17000121746	·				
nis amendment is submitted to amend the following:					
. If amending name, enter the new name of the lim	<u>ited liability company</u>	<u>herc</u> :			
	/A				
ne new name must be distinguishable and contain the words "Lir	nited Liability Company," the	e designation "LLC"	or the abbr	eviation "l	
nter new principal offices address, if applicable:					€\$
. ,	DECC)	N/A		1970	
Principal office address MUST BE A STREET ADD	KESS)			<u> </u>	
			;		1
			:	24	İ
nter new mailing address, if applicable:		N/A		>	_ `
Mailing address MAY BE A POST OFFICE BOX)			:* 	<u> </u>	
			-	<u>. 0</u>	
	-	···	32-	0,1	
. If amending the registered agent and/or registered and/or the new registered office address here:	ed office address on our	records, <u>enter t</u>	he name	of the ne	w regist
Name of New Registered Agent:	BENJAMIN Y. S.	AXON III	······································		
New Registered Office Address:		N/A			
The Magnetica Miller Hames	Enter F	lorida street address			
		, Flor	rida		
	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 BENJAMIN Y. SAXON III

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	Name	Address	Type of Action
MGR	Benjamin Y. Saxon II	111 South Scott Street	□Add
		Melbourne, FL 32901	XXRemove
MGR	Benjamin Y. Saxon III	lll South Scott Street	<u>X</u> X <u>X</u> \dd
		Melbourne, FL 32901	Remove
			Change
			□ Add
			Remove
			Change
			□Add
			Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
N/A
E. Effective date, if other than the date of filing: (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 605,0207 (3 xb)
Note: If the date inserted in this block does not meet the applicable standary thing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If 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 record is filed.
Dated November 23 2020
Caroly Sursayon 1 The That
CAROLYN SUE SAXON, as attorney BENJAMIN Y. SAXON III, as Manager of in fact for BENJAMIN Y. SAXON II BENJAMIN Y. SAXON II, PLLC, and as
under a Durable Power of Attorney attorney in fact for BENJAMIN Y. SAX
dated May 2, 2019 If under a Durable Power of Attorney dated May 2, 2019
AND pursuant to Minutes of a Special Meeting of BENJAMIN Y. SAXON II, PLL held on November 20, 2020, copies of both documents being attached thereto and made a part hereof by references from Fig. 19 Sec. \$25.00
and made a part hereor by returning Fee: \$25.00