L17000193913

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
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Office Use Only



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S. WARREN AUG 1 7 2017

COVER LETTER

| | gistration Sec ision of Corp | | | |
|----------------|---------------------------------|--|---|---|
| SUBJECT: | | ge Park Botanicals, LLC | | |
| SUBJECT. | | Name of Lim | ited Liability Company | |
| | | Amendment and fee(s) are sub | _ | |
| | | Terese Cerna Driscoll | | |
| | | | Name of Person | |
| | | Surterra Holdings Inc. | | |
| | | | Firm/Company | |
| | | 3340 Peachtree Road, NE, | Ste. 1010 | |
| | | | Address | |
| | | Atlanta, GA 30326 | | |
| | | | City/State and Zip Code | |
| | | teernadriscoll@surterrahold | lings.com to be used for future annual report r | |
| For further in | iformation ec | oncerning this matter, please ca | · | iorneation |
| Terese Cern | a Driscoll | | at (| ext. 505 |
| | Name of | Person | Area Code Day | time Telephone Number |
| Enclosed is | check for th | e following amount: | | |
| ■ \$25.00 F | iling 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

| SDC Orange Park Botanicals, LLC | | | | | |
|---|--|---|--|--|--|
| (<u>Name of the Limited Liabili</u> (A Florida | ty Company as it now appears on or a Limited Liability Company) | ir records.) | | | |
| The Articles of Organization for this Limited Liability C Florida document number <u>L17000153913</u> | Company were filed on July 18, 2 | 2017 and assigned | | | |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the lim | ited liability company here: | | | | |
| The new name must be distinguishable and contain the words "Lin | nited Liability Company," the designat | ion "Ll.C" or the abbreviation "L.L.C." | | | |
| Enter new principal offices address, if applicable: | | | | | |
| (Principal office address MUST BE A STREET ADDI | RESS) | | | | |
| | | <u> </u> | | | |
| Enter new mailing address, if applicable: | | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office add | | records, enter the name of the ne | | | |
| Name of New Registered Agent: | | | | | |
| New Registered Office Address: | Enter Florida str | eet address | | | |
| | | | | | |
| | City | , Florida Zip Code | | | |
| New Registered Agent's Signature, if changing Registere | ed Agent: | | | | |
| I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the register | complete performance of my d igent as provided for in Chapt | uties, and I am familiar with and er 605, F.S. Or, if this document is | | | |

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|------------------------|---------------------------------------|---------------------------------------|
| MGR | Surterra Holdings, LLC | 1639 Village Square Blvd | |
| | | Tallahassee FL 32309 | ■ Remove |
| | | | Change |
| MGR | Surterra Florida, LLC | WeWork c/o Surterra Florida | = Add |
| | | 1175 Peachtree St. NE, Atlanta, GA | □ Remove |
| | | | □ Change |
| | | | □ Add |
| | | · · · · · · · · · · · · · · · · · · · | Remove |
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| native data if other than the date | o of Clina. | antional) |
| ective date, if other than the date effective date is listed, the date must be s | pecific and cannot be prior to date of filing or more than 90 days | optional) after filing.) Pursuant to 605.020 |
| If the date inserted in this block d | loes not meet the applicable statutory filing requirements, ment of State's records. | , this date will not be listed a |
| ument's effective date on the Depart | | |
| ument's effective date on the Depart | | |
| ument's effective date on the Depart | ective date, but not an effective time, at 12:0 is filed. | 01 a.m. on the earlier |
| ument's effective date on the Depart record specifies a delayed eff | ective date, but not an effective time, at 12:0 is filed. | 01 a.m. on the earlier |
| ument's effective date on the Depart record specifies a delayed eff he 90th day after the record | is filed. | E 17 |
| ument's effective date on the Depart record specifies a delayed eff he 90th day after the record August 14 | is filed. | E 17 |
| record specifies a delayed eff he 90th day after the record August 14 | is filed. 2017 | 17 AUG |
| record specifies a delayed eff he 90th day after the record August 14 | is filed. | E 17 |

Page 3 of 3

Filing Fee: \$25.00