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D CUSHING

COVER LETTER

Division of Cor				
	ER DIVERSIFIED INVESTM	ENTS, LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The englowed Articles of	Amendment and fee(s) are sub	mitted for filing		
	ondence concerning this matter	-		
	Stephen B. Shell			
	·	Name of Person		
	Carver Darden			
		Firm/Company		
	151 West Main Street, Sui	te 200		
		Address		
	Pensacola, Fl. 32502			
		City/State and Zip Code		20
	shell@carverdarden.com			0 001
	E-mail address: (to be used for future annual report notifi	cation)	رد. د .
For further information c	concerning this matter, please c	all;		
Stephen B. Shell		850 266-2564 at ()		ာ ယှ
Name o	of Person		Telephone Number	3: 1:5
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	S30.00 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)	ı
<u>Mailing Addre</u> Registration	Section	Street Address: Registration Sec		
Division of C	Comporations	Division of Corr	orations	

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

	S OF AMENDMENT TO OF ORGANIZATION OF	100C126 PK 31.5
CALCUTTER DIVERSIFIED INVESTMEN	TS, LLC	المراجع المراجع
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability (Florida document number L17000210179	Company were filed o <u>n 10/11/2017</u> —.	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or t	he abbreviation "L.I.,C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	<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 address here:	office address on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
in managaring gap parameter	, Florid:	Vin Cod.

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 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
			□ Add
			Remove
			Change
			🗖 Remove
			□Change
			□Add
			Remove
			☐ Change
			□Add
			□ Remove
			🗆 Change
	 		□Add
			□Remove
			□ Change
-			DAdd
			□Remove
			Change

fective date, if other than the date of filing: (optional)											
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 605.02 office: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed accument's effective date on the Department of State's records. The effective date on the Department of State's records. The effective date of the earlier of: (b) The 90th day after the is filed. The effective date of the earlier of: (b) The 90th day after the is filed.											
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Signature of a member or authorized representative of a member				1/3	5-						
				$\alpha \sim 10^{-2}$							

Filing Fee: \$25.00