

L17000232679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

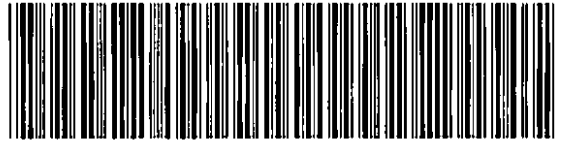
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- CERTIFIED COPY \_\_\_\_\_
- PHOTOCOPY \_\_\_\_\_
- CUS \_\_\_\_\_
- FILING LLC AMEND \_\_\_\_\_

1. STC KRUGER, LLC  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL INSTRUCTIONS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

**FILED**

2022 AUG -9 PH12:28

SECRETARY OF STATE  
TALLAHASSEE, FL

STC KRUGER, LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on November 13, 2017 and assigned Florida document number L17000232679.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

101 Central Avenue

**(Principal office address MUST BE A STREET ADDRESS)**

St. Petersburg, FL 33701

**Enter new mailing address, if applicable:**

C/O Sabal Trust

**(Mailing address MAY BE A POST OFFICE BOX)**

101 Central Avenue

St. Petersburg, FL 33701

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Bryant N. Jones

New Registered Office Address:

101 Central Avenue

*Enter Florida street address*

St. Petersburg

Florida

33701

*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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Bryant N. Jones	C/O Sabal Trust	<input checked="" type="checkbox"/> Add
		101 Central Avenue	<input type="checkbox"/> Remove
		St. Petersburg, FL 33701	<input type="checkbox"/> Change
PVPST	Bryant N. Jones	C/O Sabal Trust	<input checked="" type="checkbox"/> Add
		101 Central Avenue	<input type="checkbox"/> Remove
		St. Petersburg, FL 33701	<input type="checkbox"/> Change
MGR	John F. Ralph, Jr.	6850 Central Avenue, Suite B	<input type="checkbox"/> Add
		St. Petersburg, FL 33707	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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