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| Certified Copies | _ Certificates | s of Status |
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| Special Instructions to f | Filing Officer: | |
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DIVISION OF CONTENT OF 31

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COVER LETTER

| TO: | Registration Se Division of Cor | | | r ^a | |
|----------------|------------------------------------|--|--|--|--|
| CHDIE | / YT. | STMENTS, LLC | | | |
| SUBJE | CI: | Name of Lim | ited Liability Company | · | |
| The enc | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please r | eturn all correspo | ondence concerning this matter | to the following: | | |
| | | THOMAS J. O'SULLIVA | N | | |
| | | | Name of Person | | |
| | | | Firm/Company | | |
| | | 336 NASSAU AVE. | | | |
| | | Address | | | |
| | | MANHASSETT, NY 110 | 030 | | |
| | | City/State and Zip Code | | | |
| | | tomjosullivan08@gmail.co | m to be used for future annual repo | rt notification) | |
| For furt | her information c | oncerning this matter, please c | · | | |
| BRIAN | N EASTMAN | | 877 229-97 at () | 63 | |
| | Name (| r Person | Area Code I | Daytime Telephone Number | |
| Enclose | ed is a check for t | he following amount: | | | |
| ■ \$ 25 | .00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55,00 Filing Fee & Certified Copy tadditional copy is enclosed | □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) | |
| | Regist Divisio | ING ADDRESS: ration Section on of Corporations | STREET/CO Registration : Division of C | Corporations | |

TYPOGRAPHICAL CHANGE - MANAGER NAME

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| TJO INVESTMENT, LLC | | |
|---|--|-----------------------------|
| (<u>Name of the Limited Liability Comp</u> (A Florida Limited | nany as it now appears on our records.) (Liability Company) | |
| The Articles of Organization for this Limited Liability Compan | y were filed on 6/1/2018 | and assigned |
| Florida document number L18000136139 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | bility company here: | |
| The new name must be distinguishable and contain the words "Limited Liab | oility Company," the designation "LLC" of | r the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | 1 01√2 |
| (Principal office address MUST BE A STREET ADDRESS) | | 200 SEC |
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| | | <u> </u> |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | ω |
| B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he | | enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | |
| | Erner v wrkta streecaatess | |
| | , Flori | |
| | 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, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|---------------------|----------------|----------------|
| MGR | DANIELLE O'SULLIVAN | | |
| | | | ☐ Remove |
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| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) | |
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| F. 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.) Pursua Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records. | ant to 605.0207 (3 ot be listed as th |
| If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the (b) The 90th day after the record is filed. | e earlier of: |
| Dated June 16 2018 | |
| Dated June 16 2018. Signature of a member or authorized representative of a member | - |
| THOMAS J. O'SULLIVAN | |
| Typed or printed name of signee | |

Page 3 of 3

Filing Fee: \$25.00