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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FREEDOMTAX ACCOUNTING & MULTISERVICES, INC.

Account Number : I20180000068 : (407)344-1012 : (407)344-1371 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CAMP ROAD HOLDINGS, LLC

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AUG 0 7 2020

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Camp Road Holdings LLC				
(Name of the Limi	ed Lighility Company (A Florida Limited Lis	y as it now appears on our rability Company)	ecords.)	
The Articles of Organization for this Limited L	iability Company w	were filed on 07/26/2018	and ass	signed
This amendment is submitted to amend the foll	owing:			
A. If amending name, <u>enter the new name o</u>	f the limited liabil	ity company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabilit	y Company," the designation	"LLC" or the abbreviation "L	.L.C."
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
				<del></del>
				20
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)			
	<del></del>			ِ رُنِ 1 - <u>- حو</u>
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ac ss here:	ddress on our records, g	nter the name of the ne	w registered
Name of New Registered Agent:	Math	alie R.H. I	lasson And	i erson
New Registered Office Address;	461 Eagle Cr	Enter Florida strees	address	
	Casselberry		_, Florida <u>32707</u>	
		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.

Nathalia R.H. Massan Andanan 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>	Name	Address	Type of Action
MGR	Nathalic R.H. Masson Andersson	1327 Yorkshire Ct	
		Davenport, FL 33896	■ Remove
			Change
MGR	Kevin Masson	1327 Yorkshire Ct	
		Davenport, FL 33896	■ Remove
			☐ Change
MGR	Biofit Holdings LLC	461 Eagle Cr	≣Add
		Casselberry, FL 32707	□Remove
			□ Change
			□ Adđ
			Петюче
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Mective date, if other than t an effective date is listed, the date in ote: If the date inserted in this ocument's effective date on the	block does not a	ncet the applic	able statutory	or more than 90 filing requirem	_ (optional) days after filing ents, this date	) Pursuant to 605.02 will not be listed :
record specifies a delayed effect is filed.	tive date, but no	t an effective t	ime, at 12:01 a	in, on the earl	er of: (b) Th	e 90th day after th
ated June 19		, 2020	<u> </u>			

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