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To:

Division of Corporations

Fax Number : (950) 617-6383

From:

Account Name : FISHER, TOUSEY, LEAS & BALL

Account Number : I19990000021 : (904)356-2600 Phone

: (904)355-0233 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 CK REAL ESTATE INVESTMENTS, LLC

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From: Fisher Tousey Leas Ball

## ARTICLES.OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CK Real Estate Investments, LL						
(Name of the Lin	ited Linbility Compa (A Florida Limited	ny as it now appears on Liability Company)	our records.)			
The Articles of Organization for this Limited Florida document number L18000244747	Liability Company	were filed on 10/17/2	018		and ass	igned
This amendment is submitted to amend the fo	llowing:					
A. If amending name, enter the new name	of the limited liab	oility company here:				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design:	ation "LLC" or th	e abbrevi	ation "L.	L.C."
Enter new principal offices address, if applicable:		501 Riverside Avenue, Suite 600				
(Principal office address MUST BE A STREET ADDRESS)		Jacksonville, Florida 32202				
Enter new mailing address, if applicable:		501 Riverside Avenu	e, Suite 600			<del> </del>
(Mailing address MAY BE A POST OFFICE BOX)		Jacksonville, Florida 32202				
3. If amending the registered agent and/or gent and/or the new registered office addr		address on our record	is, <u>enter the n</u>	ame of	the new	regist
Name of New Registered Agent:	Fisher, Tousey,	, Leus & Ball, P.A.	<b>■</b> dest <sub>y</sub> ,		<u>.√7</u> .∵3	•
New Registered Office Address:	501 Riverside A	Avenue, Suite 600		•	1 10	
		Enter Florida st	reet address	u···		C : 1
	Jacksonville		, Florida		.5	
		City	,	Zi	p 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 Heatstered Agent

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## 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

To: 18506176383

<u>Title</u>	Name	Address	Type of Action
MGR	Kornick Management, LLC	501 Riverside Avenue, Suite 600	[]Add
		Jacksonville, Florida 32202	DRemove
			≅ Change
AR	.Marvin C. Kloeppel	501 Riverside Avenue, Suite 600	□Add
		Jacksonville, Florida 32202	Remove
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record specifies a delayer is filed.	ed effective date, but	t not an effective t	ime, at 12:01 a.m	, on the earlier of: (	b) The 90th day after th
February 18		2021			
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