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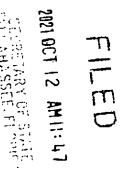
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COVER LETTER

TO: Registration So Division of Con	rporations		·	
SUBJECT:	BAN F Name of Limi	TECO Properfies Loted Liability Company	<u> </u>	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Jin	my C BARKER Name of Person		
	Bun	FIELD Properties Firm/Company		
	1483 Bridg	gethe copy Address		
	V-LEMING	City/State and Zip Code	<i>2</i> 03	
	IJ bark E-mail address: (t	VER O bellsouth. NET o be used for future annual report notif	ر (آeation)	
SUBJECT: The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Simmy C BARKER Name of Person				
Jimmy Name	BARKER	at (<u>904</u>) <u>269</u> . Area Code Daytime	109 Ō e Telephone Number	
DBJECT: BARFIELD PROPERTIES LUL Name of Limited Liability Company Same of Limited Liability Company				
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	

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

Street Address: 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

FILED

つみかただ	in troperties luc	202100112	2 AM II: 47
(Name of the Limited	Fig. Properties (LC Eliability Company as it now appe V Florida Limited Liability Company	ars on our records.)	Y OF STATE
The Articles of Organization for this Limited Liab			and assigned
lorida document number <u>L 1800</u> 245 <u>3</u>	47 .		
his amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the	designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applical	ble:		
Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE B</u>			
			
	-	records, enter the nam	ne of the new regi
	-	records, enter the nan	ne of the new regi
	-	records, <u>enter the nan</u>	ne of the new regi
Name of New Registered Agent:	-		
gent and/or the new registered office address	here:		ne of the new regi
	here: Enter Fi		

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>	Address	Type of Action
MER	RIAAN PIETES	3348 Canyou Falls Dr. Green COVE Springs FL 32043	□ Add
		Den 10/3/21	Externove
Mar	Michelle Pieters	3348 Canyon Falls Dr. Green CONE Springs FL 32043	√ ∆dd
		<u> </u>	©Remove
			□Change
MgR	J BANFIELD & CO. LLC	1483 Brichelle Way FLEMING ISTEND FL 32003	W.Add
			□Remove
			□Change
			□Add
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etti etti	ve date, if other than the date of filing:
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
	and a criteciane data on the population of data a recordant
COEC	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s file	
ed .	/0-5-2/
	A. I
	Signature of a momber of authorized representative of a member
	Signature of a momber of authorized representative of a member Jimny C BARKER Typed or printed name of signee