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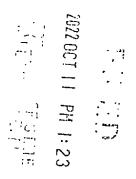
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## **COVER LETTER**

TO:

Registration Section

Div	ision of Corp	orations				
and the mark culture	315 ELIZAB	ETH ST., LLC	,			
SUBJECT:	Name of Limited Liability Company					
The enclosed	l Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		PETER BATTY				
			Name of Person			
			Firm/Company			
		912 GEORGIA ST.	Address			
		KEY WEST FL 33040	, , , , , , , , , , , , , , , , , , , ,			
			City/State and Zip Code	<del></del>		
		pbattyfarm@gmail.com				
Constitution in	stromation oo	E-mail address: (incerning this matter, please ca	to be used for future annual	report notification)		
PETER BAT		ncerning this maner, prease ca		7-0656		
LUILK DA				Daytime Telepho		
	Name of	Person	Area Code	Daytime Telepho	one Number	
Enclosed is a	i check for the	following amount:				
■ \$25.00 I	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is end		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	iling Address:		Street A			
Registration Section			Registration Section			
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee			
	Hahaceee Fl			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

315 ELIZABETH ST., 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  $\frac{01/23/2019}{2}$ Florida document number  $\frac{L19000024047}{}$ 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: PETER BATTY Name of New Registered Agent: 912 GEORGIA ST. New Registered Office Address: Enter Florida street address \_. Florida 33040 Zip Code KEY WEST

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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_	,—————————————————————————————————————
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(If an effect Note: I	te date, if other than the date of filing:
he record ord is file	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 d.
Dated_	October 5-11 2022
	Signature of a member of authorized representative of a member
	PETER BATTY