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EXAMINE

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COVER LETTER

	Registration Se Division of Cor					
		ERGROUND LLC				
SUBJEC	1:	Name of Lin	nited Liability Company	·		
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for tiling.			
Please ret	urn all correspo	indence concerning this matter	to the following:			
		Cheyenne Moseley				
			Name of Person			
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Cheyenn	e Moseley		800 773-0888 at ()			
	Name o	f Person	Area Code Daytim	e Telephone Number		
Enclosed	is a check for th	ne following amount:				
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	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, F1, 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, Fl. 32	on rations rater Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ANG UNDERGROUND LLC					
(Name of the Limited Liability Comp (A Florida Limite	pany as it now appears of I Liability Company)	n our records.)			
The Articles of Organization for this Limited Liability Compar Florida document number <u>L19000075385</u>	by were filed on $\frac{03/18}{2}$	2019	_ and as	signed	d
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 Lia	bility Company." the design	enation "LLC" or the abbre	viation "L	L.C."	
Enter new principal offices address, if applicable:		_		<u>&</u>	
(Principal office address MUST BE A STREET ADDRESS)			<u>i</u>	<u> </u>	
				 	7
			· - <	ည်	1
Enter new mailing address, if applicable:					** حتا . ; ; سامت
(Mailing address MAY BE A POST OFFICE BOX)				25	the ne
			138 138	0	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he Name of New Registered Agent:		ur records, <u>enter th</u>	ie namę	of th	<u>1e ne</u>
New Registered Office Address:	2. 17. 17	streetaddress			
	rnær r amau				
	City	, Florida	ZipCode		—
New Registered Agent's Signature, if changing Registered Agen	•		·		
I hereby accept the appointment as registered agent and as provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ie performance of my s provided for in Cha	i duties, and I am fan ipter 605, F.S. Or, if	niliar wi this doc	ith and umen	d
ir c)	sanging Registered Avent	. Signature of New Regis	tered Age	ent	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	BOBE, ED	12217 PAPERGRAFT AVE.	
		WEEKI WACHEE, FL 34614	■ Remove
			□ Change
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sective date, if other than the date of filing: a effective date is listed, the date must be specific and cannot be prior to date of	(optional)
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Signature of a member or subminized re	The state of a member
Signature of a member of Similarmore to	
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