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COVER LETTER

TO: Registration Section Division of Corpo			
subject: <u>33</u>	51 North		
	Name of Limi	ited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Brady J	. (6) Name of Person	
		Name of Person	
		Firm/Company	
	1112 N.	FLAMUE DOVA	
		FLARUY DNVL Address	
	ford law	2012/01/2 51 222	n4
	TUPT LUM	City/State and Zip Code	<u>U</u> 7
	Whan br	TAN (10 SD) Albal.	(0)M
	E-mail address: ()	to be used for future annual report notific	ation)
For further information con	neerning this matter, please ca	all:	
CALLERIA.	Fender _	904 527-1	4111
Name of F	Person	at (<u>954</u>) <u>527-1</u> Area Code Daytime	Felephone Number
Enclosed is a check for the	following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.
-	Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
		1	(additional copy is enclosed)
Mailing Address:		<u>Street Address:</u>	
<u>Mailing Address:</u>		(additional copy is enclosed) Street Address:	Certified Copy

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

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

3351 NOrth Federal, LLL

(Name of the Limite	d Liability Co. A Florida Limi	mpany as it nov ted Liability Cor	y appears on oumpany)	ar records.)		_	
The Articles of Organization for this Limited Liz Florida document number <u>LIG DOOD</u>	ability Compa	any were filec	1 on 04/1	05/2019	and	assigne	ed .
This amendment is submitted to amend the follo	wing:						
A. If amending name, enter the new name of	the limited l	<u>iability comp</u>	oany here:				
The new name must be distinguishable and contain the wo	ords "Limited L	iability Compan	y," the designat	ion "LLC" or the	abbreviation	ı "L.L.C.	
Enter new principal offices address, if applica	ıble:						
(Principal office address MUST BE A STREET ADDRESS)						<u>0</u>	
					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	源 -2	,
Enter new mailing address, if applicable:			-	.		<u> </u>	-
(Mailing address MAY BE A POST OFFICE I	<u>30x)</u>					2: 1;2	
B. If amending the registered agent and/or reagent and/or the new registered office addres		ice address of	n our record	s, <u>enter the na</u>	me of the	new re	gistered
Name of New Registered Agent:	D. A.	Eddy,	PLLL				
New Registered Office Address:	1112	N. FI	MAUX Tinter Florida str	oet address			
	<u>firt</u>	Lanell	Mull	Florida _	333 (Zip Ci	U4 ode	

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 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
AMBR	Steven Avalon	1112 N. Flagier Drive	🖸 Add
		Fort Lauderlau, FL 33:	304 BRemove
			□ Change
AMBR	Brady Cobb	1112 N. Flagur Drive	∭∆dd
	,	FOY LAUDELAAU, FL 33304 Bremove	
			□Change
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ffective date, if other than than effective date is listed, the date is	ne date of filir	ng:	ior to date of fil	ing or more than	(option	nal) iling.) Pursua	unt to 605	5.020
ote: If the date inserted in this ocument's effective date on the	block does not	meet the app	licable statute	ry tiling requi	rements, this	date will no	ot be list	ed a
seament's effective date on the	trepartment of	Trace 3 record	u.,,					
record specifies a delayed effect	tive date, but no	ot an effective	: time, at 12:0	1 a.m. on the	earlier of: (b)	The 90th	day afte	r the
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Filing Fee: \$25.00