L19000123064

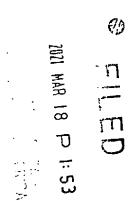
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COVER LETTER

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SUBJEC		GRO129 LL	c .			
SOBJEC	-1		Name of Lim	ited Liability Company		
The enclo	osed A	Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please ret	turn a	II correspon	dence concerning this matter	to the following:		
			Jessica Cothern			
				Name of Person		
			Law 4 Small Business, P.O.	2.		
				Firm/Company		
			320 Gold Ave. SW, Ste. 6	20		
				Address		
			Albuquerque, NM 87102			
				City/State and Zip Code		
			FILINGS@L4SB.com		<u></u>	
For further	er info	ormation co	ncerning this matter, please co	to be used for future annual report notification)		
Jessica C				505 715-5700		
		Name of	Person	at ()	umber	
				,		~
Enclosed	is a c	heck for the	following amount:		2021	Q)
≘ \$2 5.0	00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy Certified Copy Certified Copy (additional copy is enclosed) Certified Certified Copy Certified Copy (additional copy is enclosed)	.00 Filing Fee	ゴニカフ
Mailing Address: Registration Section Division of Corporations		ection	Street Address: Registration Section Division of Corporations	<i>≨</i> ∵ U		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303	iite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRO129 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 05/07/2019 and assigned Florida document number L19000123064 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	CDH Twelve Holdings LLC	317 Commercial St NE Ste A PMB 679	
		Albuquerque. NM 87102	= Remove
			□ Change
AMBR	Staci Holweger	19706 71st Ave E	■Add
		Bradenton, FL 34211	□Remove
			□Change
			□Add
			□ Remove
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document 3 effective date off the	Department of Stat	e s records.				7.	ŭ	
e record specifies a delayed effec rd is filed.	tive date, but not an	effective time,	at 12:01 a.m. o	n the earlier	of: (b)	The 90)th day a	ifter the
Dated March 15		2021						
	sell-							
	Signature of a men	nber or authorized	representative	of a member				•

Filing Fee: \$25.00