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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMSLEY LLC						
(Name of the Limited	Liability Compa Florida Limited	any as it now appears on our re- Liability Company)	cords.)			
The Articles of Organization for this Limited Liability Company were filed on MAY 15, 2019 Florida document number L19000131869			and assigned			
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liab	oility company here:				
The new name must be distinguishable and contain the wor	rds "Limited Liabi	lity Company," the designation "	LLC" or the abbre	vianon 7L		
Enter new principal offices address, if applicat	ole:	501 RIVERSIDE AVE ST	E 700-90253		9 0.	
(Principal office address MUST BE A STREET	ADDRESS)	JACKSONVILLE, FL 32202		12170		
				<u> </u>	9	
Enter new mailing address, if applicable:		501 RIVERSIDE AVE ST	E 700-90253	12.	三 :	
(Mailing address MAY BE A POST OFFICE BO	OX) JACKSONVILLE, FL 32		02	7 P 27 T 27 T	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of ce address here	<u>e</u> :	ords, <u>enter th</u>	этеп э	of the n	
Name of New Registered Agent:						
New Registered Office Address:	501 RIVERSID	DE AVE STE 700-90253				
	IA CVCONNIII	Enter Florida street add				
	JACKSONVIL	City .	Florida 32202	Zip Code		
New Registered Agent's Signature if changing De-	alatamad tauwa	- ,		ыр соце		

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

Page 1 of 3

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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. II um	ending any other information, enter change(s) here: (Attach additional sheets, if necessary),			
				
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Effecti	ve date, if other than the date of filing:		1:01	-
Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Proof the date inserted in this block does not meet the applicable statutory filing requirements, this date will ent's effective date on the Department of State's records.	ırsılant to 6 II not be li	05.0207 (sted as t	3)(b) he
he rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on 90th day after the record is filed.	the ear	lier of:	
Dated	SEPTEMBER 18 2019			
	Dead Podin			
	Signature of a member or authorized representative of a member			

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Filing Fee: \$25.00