L19000221017

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Y. SCOTT

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COVER LETTER

TO:

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empreser	Cracker Wo	ood, LLC				
SUBJECT:		Name of Lim	ited Liability Company	·		
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Donald L. Burch, Jr.				
			Name of Person			
		Cracker Wood, LLC				
Firm/Company						
		85612 Avant Road				2023 AUG
			Address			AU
		Yulee, FL 32097				2023 AUG 28 PM 3: 11
			City/State and Zip Cod	e		P 3
		outdoorburch@gmail.com		-1		မှ <u>ိ</u>
For further in	iformation c	e-mail address: (oncerning this matter, please c	to be used for future annual all:	ai report notification)	_ 3
Donald L Bu	irch, Jr.		904 5 at ()	509-0176		
	Name o	f Person	Area Code	Daytime Telepl	hone Number	_
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is e		S60.00 Filing F Certificate of S Certified Copy tadditional copy is	Status &
Mailing Address:		· · · · · · · · · · · · · · · · · · ·	Address: tration Section			
Registration Section Division of Corporations			_	ion of Corporati	ons	
P.O. Box 6327			The Centre of Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cracker Wood, 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 $\frac{8/29/2019}{1}$ and assigned Florida document number L19000221017 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 registerec agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida ___

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 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
Member	Donald L Burch, III	85581 Claxton Road, Yulee, FL 32097	= Add
			□Remove
			□ Change
Member	Patricia E Burch	1933 North Sedgwick St, Unit #1, Chicago. IL 60	0614
			□Remove
			□Ghange SECUTOR □ VISION F
			FILED STATES
			🗆 Add
			□Remove
			□Change
			🗆 Add
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if an eff <u>Note:</u>	ve date, if other than the date of filing:	n to 605.0207 be listed as
e recor rd is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th ded.	ay after the
Dated	823- ,2023.	
	Signature of a member or authorized representative of a member	
	And Frank To	
	Typed or printed name of signee	