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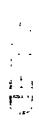
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COVER LETTER

SUBJECT: Schools Sand Sand Section Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Schools Sand Section Schools Sand Section Sand Section Section Name of Person Area Code Daytime Telephone Number Schools Schools Section Division of Corporations Street Address: Registration Section Division of Corporations Street Address: Registration Section Division of Corporations Division of Corporations	TO: Registration So Division of Cor			
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Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\sum_{\frac{1}{2}}\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$\frac{1}{2}\$60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$\frac{1}{2}\$860.00 Filing Fee, Certified Copy (additional copy is enclosed) \$\frac{1}{2}\$860.00 Filing Fee, Certified Copy (additional copy is enclosed)		E-mail address: (to be used for future annual report noti-	fication)
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P.O. Box 6327 The Centre of Tallahassee				
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	i aiianassee, i	TL 32314		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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О	F	
Scheneau S	ardie, LLC	2021 JAH 26 PH 5: 19
(Name of the Limited Liability Compa	ny as it now appears on our re	ecords.) 9
(A Florida Limited I	.iability Company)	THE THE STATE OF T
The Articles of Organization for this Limited Liability Company	were filed on	0 6 20 9 and assigned
Florida document number <u>L 19000 22 5795</u> .	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
	~	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)		
	·	_
3. If amending the registered agent and/or registered office a	Adress on our records, or	ntou the name of the new negister
gent and/or the new registered office address here:	daress on our records, en	iter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street aa	ddress
		. Florida
	City	Zip Code

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 = M $AMBR = A$	Aanager Authorized Member	Sec. Fine Line	
<u>Title</u>	<u>Name</u>	Address JAN 26 PM 5: 19	Type of Action
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ffective date,	if other than the date of filing: 10 09 2019 (optional)
an effective date	is listed, the date must be specific and cannot be priòr to dale of filing or more than 90 days after filing.) Pursuant to 605.0207 (
	te inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t active date on the Department of State's records.
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	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	s a delayed effective date, but not an effective time, at 12.01 a.m. on the earner of (b) The 30th day after the
<u>J</u>	2021
ated 11 (1)	nurary 182021.
	Signature of a member or authorized representative of a member
	•
	Scheneca Sardine Typed or printed name of signee
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