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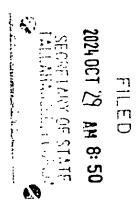
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## **COVER LETTER**

TO:	Registration Se Division of Cor						
ento n	CCT.		FUND III. LLC				
SUBJI	ECT:		nited Liability Company	<del>-</del> .			
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
			Lori A. Linn				
			Name of Person	_			
	Haddock Professional Association						
			Firm/Company				
		330	00 University Blvd., Suite	218			
			Address				
		,	Winter Park, Florida 3279	22			
		City/State and Zip Code					
			loril@fuillsail.com				
		E-mail address: (	to be used for future annual r	report notification)			
For fur	ther information c	oncerning this matter, please c	all:				
Lori A	Linn		407 at ( )	571-3908	:		
	Name o	f Person	Area Code	Daytime Telepho	one Number		
Enclos	ed is a check for the	ne following amount:					
<b>■</b> \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

Mailing Address:

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

Street Address:

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

FILED

SG OZ FUND III, LLC

2024 OCT 2 AM 8: 50

( <u>Name of the Limited Liability Comp</u> (A Florida Limited The Articles of Organization for this Limited Liability Compan	p <mark>any as it now appears :</mark> I Liability Company)	on our records:	Y OF STATE	
	12/1/	0/2010	Facilities (	
The Articles of Organization for this Limited Liability Compan	y were filed on 12/10	37.2012	and assemed	
Florida document number L19000301040			·	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company her	<u>e</u> :		
FCB, LLC				
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the des	ignation "LLC" or the a	bbreviation "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)				
(Maining dudiess MAT BE AT OST OFFICE BOA)				
			· · · ·	
B. If amending the registered agent and/or registered office	e address on our rec	ords, enter the nar	ne of the new register	
agent and/or the new registered office address here:		oras, enter the har	ne of the new register	
Name of New Registered Agent:				
New Registered Office Address:	Enter Florid	la street address		
<del></del>	City	Florida	Zin Code	
Non-Danistanad Assarta Cinastana (fakusaisa D. 1991)	•		глуг хэнис	
New Registered Agent's Signature, if changing Registered Agen	_			
I hereby accept the appointment as registered agent and ag	gree to act in this ca	ipacity. I further aş	gree to comply with t	

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 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>	<u>Address</u>	Type of Action
MGR of 1	Richard T. Grelecki	3300 University Blvd., Suite 218	■Add
		Winter Park, Florida 32789	□Remove
			□ Change
MGR of t	J. Brock McClane	3300 University Blvd., Suite 218	■Add
		Wimter Park, Florida 32789	□Remove
			□ Change
			□ Add
			Remove
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fective date, if other in effective date is listed, in te: If the date inserted cument's effective date	the date must be spec d in this block doe	tific and cannot be p is not meet the ap	plicable statutory	or more than 90 da filing requiremen	(optional) ys after filing.) Purs nts, this date will t	uunt to 605.020 not be listed t
ecord specifies a delay is filed.	ed effective date,	but not an effectiv	e time, at 12:01 a	.m. on the earlie	r of: (b) The 90t	h day after th
October ted		2024	·			
		7	relati	_		
	Signatu	ire of a member or	uthorized represent	ative of a member		

Filing Fee: \$25.00