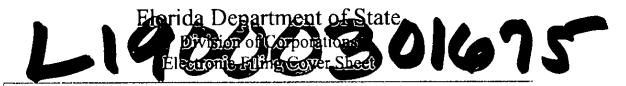
1/9/2020

Division of Corporations



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COVER LETTER

	Registration Sec Division of Corp				
	HIGH RYSI				
SUBJEC	Γ:		ed Liability Company		
The enclo	sed Articles of A	amendment and fee(s) are subm	nitted for filing.		
Please ret	um all correspor	idence concerning this matter t	o the following:		
		Cheyenne Moseley			
			Name of Person		
		Legalzoom.com, Inc.			
			Firm/Company		
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			d Blvd 11th Fl Address		
		Glendale, CA 91203			
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		lisa_g_high@yahoo.com			
		E-mail address: (t	o be used for future annual report notifi	cation)	
For furth	er information co	oncerning this matter, please ca	dl:		
Cheyenn	e Moseley		800 773-0888 at ()		
	Name o	Person	Area Code Daytime	Telephone Number	
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Q \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To: Page 4 of 6

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

HIGH RYSE LLC		
(Name of the Limited Lia (A Flo	ibility Company as it now appears on our re orida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liabilit	cy Company were filed on 12/11/2019	and assigned
Florida document number L19000301675	'	
This amendment is submitted to amend the following	2;	
A. If amending name, enter the new name of the	limited liability company here:	
HIGH RYS LLC		
The new name must be distinguishable and contain the words '	'Limited Liability Company," the designation	"L1.C" or the abbreviation L.C."
Enter new principal offices address, if applicable:		PER L
(Principal office address MUST BE A STREET AL	ODRESS)	2
		- 2
		SEE OF S
Enter new mailing address, if applicable:		F S 9: 1
(Mailing address MAY BE A POST OFFICE BOX	2	
		<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our re address here:	cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
_		_, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Regis		
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a	gent and agree to act in this capacity nd complete performance of my duti	r. I further agree to comply with the es, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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.

_____ Change

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	uthorized Member	•	•
<u>Title</u>	Name	Address	Type of Action
AMBR	RYSE, BRUCE	7165 SW 93RD AVE	
		OCALA, FL 34481	
		Market and the second	Change
AMBR	RYS, BRUCE	7165 SW 93RD AVE	⊟ Add
		OCALA, FL 34481	7.
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Effect	ive date, if other fective date is listed,	r than the date	of filing:				(optio	nal)	***	
Note:	If the date inserte	d in this block do	oes not me	et the applic	able statutory	filing requirer	nents, this	iling.) Pursi date will n	ot be list	cd as
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