Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : 120070000020

Phone : (813)435-3176

Fax Number

: (813)333-6358

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: NS PNICKS Pradin. CM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JARRY AVE. LLC

Certificate of Status	0
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## .; • ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION 020 **OF**

JARRY AVE. LLC					
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)	-			
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 12/26/2019	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
MILESTONE CAPITAL, LLC					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	1 Florida Park Dr S				
(Principal office address MUST BE A STREET ADDRESS)	Suite 115				
The policy of the same of the	Palm Coast, Florida 32137				
Enter new mailing address, if applicable:	1 Florida Park Dr S				
(Mailing address MAY BE A POST OFFICE BOX)	Suite 115				
Transfer Comments of the Comme	Palm Coast, Florida 32137				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new register			
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address				
	, Florid	a			
	City	Zip Code			
New Registered Agent's Signature, if changing Registered Agent:	1				

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 = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	THE LAW OFFICES OF NICK SPRADLIN, PLLC	18801 N. DALE MABRY HWY	□Add
		SUITE 119	<b>■</b> Remove
	•	LUTZ, FL 33548	Change
MGR	Zander Burger	i Florida Park Dr S	
		Suite 115	□Renwve
		Palm Coast, Florida 32137	
AMBR	Gina Harding	l Florida Park Dr S	■Add
		Suite 115	□Remove
		Palm Coast, Florida 32137	□Change
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	07/30		2020			
Signature of a member or authorized representative of a member	Dated			,		
Signature of a monitor of auditorized representative of a aremove		Sign attura and a ma	of the or or authoriz	ed representative of	a member	<del></del>
NICKOLAS J. SPRADLIN, ESQ. AUTHORIZED REP. OF A MEMBER  Typed or printed name of signee	NICKOLAS J. SP				R 	<del></del>