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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer | |
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| | egistration Se ivision of Cor | | | |
|-------------|----------------------------------|--|---|--|
| eun irza | V 3 FUND | III PALM COAST, LLC | | |
| SUBJECT | : | Name of Lim | ited Liability Company | |
| The enclos | sed Articles of | Amendment and fee(s) are sub | mitted for tiling. | |
| Please retu | irn all correspo | ndence concerning this matter | to the following: | |
| | | JOHN C VICK III | | |
| | | | Name of Person | · · · · · · |
| | | V 3 FUND HEPALM CO | AST, LLC | |
| | | | Firm/Company | |
| | | 496 S. HUNT CLUB BOU | JLEVARD | |
| | | | Address | |
| | | APOPKA, FL 32703 | | |
| | | | City/State and Zip Code | |
| | | CAROLYN@V3CAPGRO | OUP.COM to be used for future annual report no | diferition) |
| For further | information c | oncerning this matter, please e | | incattally |
| CAROLY | N STANLEY | | 407 848-1663 | |
| | Name o | f Person | at () Area Code Daytir | ne Telephone Number |
| Enclosed i | s a check for th | ne following amount: | | |
| \$25.00 |) Fifing 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) |
| | lailing Addres | | Street Address: Registration So | ection |
| Đ | ivision of C | orporations | Division of Co | rporations |
| | .O. Box 632 allahassee. I | | The Centre of 2415 N. Monre | Tallahassee oe Street, Suite 810 |

Tallahassee, FL 32303

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

123 71 1113

| V 3 FUND HEPALM COAST, LL | V | 3 FU | ND III | PALM | COAST. | LLC |
|---------------------------|---|------|--------|------|--------|-----|
|---------------------------|---|------|--------|------|--------|-----|

(Name of the Limited Liability Company as it now appears on our records.)

| The Articles of Organization for this Limited Liability Company were filed on 3/18/2020 and assign Florida document number 1.20000084388. 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 "L.L." or the abbreviation "L.L. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) APOPKA, FL 32703 | |
|---|--------------|
| 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 "L.L." or the abbreviation "L.L. Enter new principal offices address, if applicable: 496 S. FUNT CLUB BOULEVARD | .C." |
| The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L. Enter new principal offices address, if applicable: 496 S. HUNT CLUB BOULEVARD 100 PROPERTY 17, 22702 | .c." |
| Enter new principal offices address, if applicable: 496 S. HUNT CLUB BOULEVARD | .c." |
| Enter new principal offices address, if applicable: | |
| A DODLEA BL 20702 | |
| | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) APOPKA, Fl. 32703 B. If amending the registered agent and/or registered office address on our records, enter the name of the new agent and/or the new registered office address here: | registere |
| Name of New Registered Agent: V 3 CAPITAL FUND III, LLC | |
| New Registered Office Address: 496 S. HUNT CLUB BOULEVARD | |
| Enter Florida street address | |
| APOPKA , Florida 32703 | |
| City Zip Code | _ |

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.

Gina

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

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| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-----------------------------------|----------------------------|-----------------|
| MGR | V 3 CAPITAL FUND III MANAGER, LLC | 496 S. HUNT CLUB BOULEVARD | 🗀 Add |
| | | APOPKA, FL 32703 | □Remove |
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| an effective date is listed, the date must be | te of filing: specific and cannot be prior to date of filing or medoes not meet the applicable statutory filing truent of State's records. | ore than 9 | 0 days : | alter fili | ng.) Pursuar | nt to 605.0207 (be fisted as t |
| | te, but not an effective time, at 12:01 a.m. o | on the ea | rlier o | ľ: (b) | The 90th d | lay after the |
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| is filed. | . 2020 | | | | | |
| ated AUGUST 31 | 2020 | | | | | |

Filing Fee: \$25.00