L20000085157

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Office Use Only



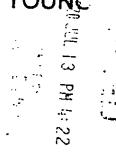
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	Registration Se Division of Cor			
SUBJEC		Lodge Cir 103, LLC	"	
SUBJEC		Name of Lin	nited Liability Company	-
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		Daniel D Blau		
			Name of Person	
		7043 Deer Lodge Cir 103,	LLC	
			Firm/Company	
		13810 Sutton Park Drive N	Sorth, unit 220	
			Address	
		Jacksonville FL 32224		
			City/State and Zip Code	<u> </u>
		danblau@msn.com		
For furthe	er information c	E-mail address: (oncerning this matter, please c	to be used for future annual report not all:	ification)
Daniel D	Blau	- ,	860 729 2109	
	Name o	f Person		ne Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	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		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7043 Deer Lodge Cir 103, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on March 18, 2020 Florida document number L20000085157 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 217 Baisden Rd, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _. Florida __ City

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
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			Remove

	
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. Effective date, if	other than the date of filing:
Note: If the date i	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ive date on the Department of State's records.
the record specifies a cord is filed.	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated July 10	2020
	Tarrier / My
. —	Signature of a member or authorized representative of a member
Daniel	D. Blau
	Typed or printed name of signee

Filing Fee: \$25.00