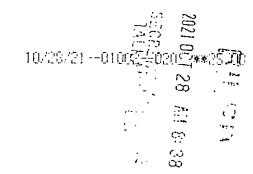
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COVER LETTER

TO:

TO: Registration So Division of Cor					
Daytona Sz	A Opco, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Sarah Connolly				
		Name of Person			
	SC Legal, PA c/o Daytona	SA Opco, LLC			
		Firm/Company			
	12425 28TH STREET N.	SUITE 100			
		Address			
	St. Petersburg, FL 33716				
		City/State and Zip Code			
	sarah@sarahconnollylegal.c	com			
	E-mail address: (to be used for future annual report no	tification)		
For further information of	concerning this matter, please c	all:			
Sarah Connolly, Esq.		561 308-9339 at ()			
Name o	of Person	Area Code Dayti	me Telephone Number		
Enclosed is a check for t	he following amount:				
\$\frac{1}{2}\$\$\\$25.00 \text{ 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 Addres		Street Address:	ection		
Registration Section Division of Corporations			Registration Section Division of Corporations		
P.O. Box 632	27	The Centre of	Tallahassee		
Tallahassee.	FL 32314	2415 N. Monr	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City	Zış	Code
	St. Petersburg	, Florida 33716	
	Ente	r Florida street address	
New Registered Office Address:	12425 28TH STREET N. SU	HTE 100	
Name of New Registered Agent:	Brad Clowney		
ent and/or the new registered office addre	ess here:		
. If amending the registered agent and/or	• •	our records, enter the name of t	he new register
		 -:	 ω
	·	. i.	
Mailing address MAY BE A POST OFFICE	<u> BOX)</u>		ات حجـــ
nter new mailing address, if applicable:	<u> </u>		2 ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
		[m	100
		<u> </u>	121
<u>Principal office address MUST BE A STRE</u>	ET ADDRESS)	······································	
nter new principal offices address, if appli	cable:	<u> </u>	
		the designation (1.1.), or the aporevia	ikni L.L.C.
ne new name must be distinguishable and contain the	words "finited Linkilly Commun."	the decimation "I I (" or the abbourie	tion "L.I.C."
. If amending name, enter the new name	of the limited liability compa	ny here:	
	•		
his amendment is submitted to amend the fo	Baning		
lorida document number 1.20000120125			Ü
he Articles of Organization for this Limited	Liability Company were filed o	on 5/4/20	and assigned
***************************************	(A Florida Limited Liability Comp	any)	
(Name of the Lim	ited Liability Company as it now a	opears on our records.)	

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 Agedt, 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
AMBR	Kristin Kutac	12425 28TH STREET N. SUITE 100	□Add
		ST. PETERSBURG, FL 33716	
			□Change
AMBR	Lauren Messmer	12425 28TH STREET N, SUITE 100	□Add
		ST. PETERSBURG, FL 33716	tARemove
			□Change
MGR	Brad Clowney	12425 28TH STREET N, SUITE 100	<u> </u>
		ST. PETERSBURG, FL 33716	OC Remove
			Thange I
			ODAdd
			□Remove
			□Change
			□Add
			□Remove
			Change
		 	□Add
		<u></u>	□Remove
			Change

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ffective date, if othe	r than the date o	f filing:	-	(ор	tional)	
an effective date is listed, lote: If the date inserte	ed in this block doe	s not meet the app	licable statutory	or more than 90 days at filing requirements, t	his date will not be	hus.uzu/ listed as
ocument's effective da	te on the Departme	nt of State's recor	ds.			
record specifies a delay	yed effective date, b	out not an effectiv	e time, at 12:01 a	.m. on the earlier of:	(b) The 90th day a	ther the
l is filed.						
October 26		. 2021	· 0 0	l M		
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	Signatu	re of a member 🖎 🛎	amorized represent	itive of a phember		

Filing Fee: \$25.00