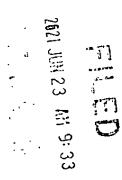
(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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JUN 24 2021 I ALBRITTON

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Floyd Road Investment, LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by: Seth 06/22/21	UCC 1 or 3 File
Name Date Tir	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO: Registration Section

Division of Corp	orations		
Floyd Road I	investment, LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspor	idence concerning this matter to	o the following:	
	John A. Paccione		
		Name of Person	
		Firm/Company	
	212 East Stuart Ave.	, ,, ,	
		Address	
	Lake Wales, FL 33853		
		City/State and Zip Code	
	john@redhorseventures.com E-mail address: (1	o be used for future annual report noti	fication)
For further information co	oncerning this matter, please ca	all:	
John Paccione		407 619-1099 at ()	
Name of	f Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 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)
<u>Mailing Addres</u> Registration		Street Address: Registration Se	
Division of C		Division of Co The Centre of	
P.O. Box 632 Tallahassee,		=	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Floyd Road Investment, LLC		<u></u>
(Name of the Limited Liability (A Florida	y Company as it now appears on our recon Limited Liability Company)	r <u>ds.</u>)
The Articles of Organization for this Limited Liability Co Florida document number L20000149172	ompany were filed on <u>06/05/2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	ESS)	282
		. N 12744
Enter new mailing address, if applicable:		ω , <u>υπη</u>
(Mailing address MAY BE A POST OFFICE BOX)		
Milwert Business Harris David Louis Co. 1 100 2 Co. 1		
		ū
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
	·	
New Registered Office Address:	Enter Florida street add	7655
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered	d Agent:	
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confidence of the obligations of my position as registered again filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of my duties, gent as provided for in Chapter 60. ed office address, I hereby confirm	and I am familiar with and 5, F.S. Or, if this document is

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>	Name	Address	Type of Action
MGR	John D. Alexander	212 East Stuart Ave.	
		Lake Wales, FL 33853	Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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Note:	ive date, if other than the date of filing:
ne recor	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	6/22 2021
_	Signature of a member or authorized representative of a member

Filing Fee: \$25.00