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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	
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COVER LETTER

TO: Registration Section

Division of Corporations

	G LA ROSE, LLC		
3000Ee1.	Name of Li	mited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are su	abmitted for filing.	
Please return all co	rrespondence concerning this matte	er to the following:	
	John D. Potter		
		Name of Person	
	EMG LA ROSE, LLC		
		Firm/Company	
	2034 Hamilton Place Blv	d., Suite 400	
		Address	·
	Chattanooga, Tennessee	37421	
		City/State and Zip Code	
	John.Potter@equitasmg.co	om	
	E-mail address	(to be used for future annual report no	tification)
For further informa	ition concerning this matter, please	call:	
George Hixson, At	tomey at Law	423 805-4529 at ()	
N	Jame of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing I	Fee S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Division P.O. Box	tion Section of Corporations	Street Address: Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EMG LA ROSE, 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 August 7, 2020 and assigned Florida document number L20000242185 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 "LLC" or the abbreviation "L.L.C." 2034 Hamilton Place Blvd., Suite 400 Enter new principal offices address, if applicable: Chattanooga, TN 37421 (Principal office address MUST BE A STREET ADDRESS) 2034 Hamilton Place Blvd., Suite 400 Enter new mailing address, if applicable: Chattanooga, TN 37421 (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

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
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			Remove
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f an effe	ective date is listed, th	e date must be specif	ic and cannot be prior	to date of filing or mo	ore than 90 days after fi	ling.) Pursuant to 605.0207
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Filing Fee: \$25.00