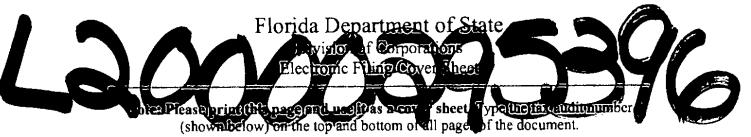
1/29/2021

Division of Corporations



(((H21000039909 3)))



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COVER LETTER

	gistration Scrision of Corp			- .		
cui u ct.		TONE GRASSROOTS LLC				
SUBJECT:	<u></u>	Name of Limi	ited Liability Company			
The enclose	d Articles of .	Amendment and fee(s) are sub-	mitted for filing.			
Please return	n all correspo	ndence concerning this matter	to the following:			
		Cheyenne Moseley				
			Name of Person			
		Legalzoom.com, Inc.				
			Firm/Company			
	101 N Brand Blvd 11th Fl					
			Address			
Glendale, CA 91203 City/State and Zip Code						
		E-mail address: (I	to be used for future annual repor	rt notification)		
For further i	nformation co	onceming this matter, please ca	all:			
Cheyenne i	Voseley					
Name of Person Area Code Daytime Telephone Num				zytime Telephane Number		
Enclosed is	a check for th	nc following amount:				
\$25,00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Fo: 18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORNERSTONE GRASSROOTS	LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited L	ny as it now appears on our (jubility Company)	records.)	
The Articles of Organization for this Limited L	iability Company	were filed on		and assigned
Florida document number L20000295396	 ,			
This amendment is submitted to amend the foli	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
The new name must be distinguishable and contain the	words "Limited Liabit	ity Company," the designation	"LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		1900 SW 55 Lune		
(Principal office address MUST BE A STREET ADDRESS)		Ocala, Florida 34471		
Enter new mailing address, if applicable:		1900 SW 55 Lane		
Mailing address MAY BE A POST OFFICE BOX		Ocala, Florida 34471		1.0
			·	
				<u> </u>
B. If amending the registered agent and registered agent and/or the new registered or	or registered of	Mice address on our re <u>c</u> :	ecords, enter	the name of the ne
		_		13
Name of New Registered Agent:	Clodyne Seidel	•		<u> </u>
New Registered Office Address:	1900 SW 55 La	ne		<u>_</u>
	Enter Floridu street address			
	Ocala		, Florida	471
		City		Zip Code

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.

Clodyne Seidel

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

LegalZoom.com, Inc.

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	MIGUEL JARAMILLO		
		12 MIDDLEGROUND RD. OCALA, FL 34482	Remove
	·		□ Change
AMBR	Clodyne Seidel		D Add
			Remove
		1900 SW 55 Lane Ocala, Florida 34471	■ Change
			D Add
			□ Remove
			Change
			∧dd
			Remove
			Change
			D Add
			Remove
			Change
			□ Remove
		•	☐ Change

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Typed or printed name of signec

ignature of a mornber of authorized representative of a member

Clodyne Seidel

Filing Fee: \$25.00