To.

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(((H240003552613)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: HOLLAND & KNIGHT OF JACKSONVILLE Account Name

Account Number : 074323003114 Phone : (904)353-2000

Fax Number : (904)358-1872

Fax Number : (904)358-1872

**Enfer the email address for this business entity to be used for future that annual report mailings. Enter only one email address please.

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Email	Address:	 		 	٦	
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T. LEMEUX

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AKI	ICLES OF C	RGANIZATION	
<i>;.</i>	O)F	
₩ f			
Plainview, LLC			
(Name of the Limi	(A Florida Limited	ny as it now appears on our record Liability Company)	<u>5.</u>)
The Articles of Organization for this Limited L	iability Company.	were filed on 01/14/2021	and assigned
Plorida document number L21000031266			
This amendment is submitted to amend the foll	.owing:		
A. If amending name, enter the new name of	f the limited liab	olity company here:	
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applic		12807 Jebb Island Circle S	
•		Jacksonville, FL 32224	<u></u>
<u>Principal office address MUST BE A STREI</u>	<u>EL ADDICESS)</u>	·	. 2
		<u> </u>	- 6, 2
Enter new mailing address, if applicable:		12807 Jebb Island Circle S	2024 OCT 2
Mailing address MAY BE A POST OFFICE	BOX)	Jacksonville, FL 32224	F
(Maining address 1915) 1915 1915 1975 1971 1975			PH P
			's' 's'
B. If amending the registered agent and/or i	revistered office:	address on our records, enter	the name of the any register
igent and/or the new registered office addre	ss here:	<u> </u>	7.7
Name of New Registered Agent:	Connie O. Gru	bbs	
New Registered Office Address:	1213 Trailwoo	d Dr.	
TOTAL INCOMESTICATION OF THE TRANSPORTER.		Enter Florida street address	r
	Nontuna Reach		32266

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.

Gonnie	Gussa	
If Changing Register	ed Agent, Signature	of New Registered Agent

From: Sabrine.Lappen@hklaw.com 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	Carol Lovell	PO Box 624	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		Comelia, GA 30531	≅ Remove
			Change
MGR	Lindsey Grubbs*	12807 Jebb Island Circle S.	□Add
		Jacksonville, Fl. 32224	□Remove
			□Change
			□Remove
			Change
		 -	□Add
			□Remove
			□Change
			□Add
			□Change
	 		□Add
			□Remove
			□Change

Page: 4 of 4

Lindsey Grubbs, as Personal R	epresentative of the Carol O. Lovell Estate	
		
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	<u> </u>	
		
		<u>.</u>
Tective date, if other than the d an effective date is listed, the date must bote: If the date inserted in this blockwament's effective date on the Dep	be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs k does not meet the applicable statutory filing requirements, this date will	uant to 605.0207 not be listed as
ecord specifies a delayed effective of is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90t	h day after the
October 21	2024	
	Andr	
	ignature of a member or authorized representative of a member	