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COVER LETTER

CHRIDA		ardscapes LLC		
SURJEC	[;	Name of Limi	ted Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please ret	um all correspo	indence concerning this matter t	to the following:	
		Thomas P. Elder		753 Daytime Telephone Number S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
			Name of Person	
		Pinnacle Hardscapes LLC		
		······································	Finn/Company	
		6901 North Lagoon Drive.	Unit 24	
			Address	
		Panama City Beach, FL 32-	408	S60.00 Filing Fee. Certificate of Status & Certificate Copy (additional copy is enclosed) Pess: on Section of Corporations are of Tallahassee
Division of Corporations Pinnacle Hardscapes LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Thomas P. Elder Name of Person Pinnacle Hardscapes LLC Firm/Company 6901 North Lagoon Drive. Unit 24 Address Panama City Beach. Fl. 32408 City/State and Zip Code E-mail address (to be used for future annual report notification) For further information concerning this matter, please call: Thomas P. Elder Name of Person To \$27-6753 Area Code Daytime Telephone Number Enclosed is a check for the following amount: 30\$25:00 Filing Fee Certificate of Status Certificate Copy (additional copy is anclosed) Mailing Address: Registration Section P. O. Box 6327 The Centre of Tallahassee				
For furthe	r information c	oncerning this matter, please ca	uli:	
Thomas F	P. Elder			
	Name of	f Person		: Telephone Number
Enclosed	is a check for th	ne following amount:		
₹ \$25.0	0 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			\	ction
		Division of Corp	porations	
	Tallahassee. H	TL 32314	2413 N. MONTOS	: SHEEL SHIE & IV

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pinnacle Hardscapes LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears o Liability Company)	n our records.)
The Articles of Organization for this Limited I Florida document number <u>L21000046747</u>	Liability Company	were filed on 01/25	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	oility company here	:
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		6901 Thomas Dr.	
The Articles of Organization for this Limited Liability Florida document number L21000046747 This amendment is submitted to amend the following: A. If amending name, enter the new name of the li The new name must be distinguishable and contain the words "I. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADdress Must BE A STREET ADdress Must BE A POST OFFICE BOX) B. If amending the registered agent and/or register agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address: Pan New Registered Agent's Signature, if changing Registered		Unit 24	
		Panama City Beac	n, FL 32408
The Articles of Organization for this Limited Liability Company Florida document number L21000046747 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Panama City B New Registered Agent's Signature, if changing Registered Agent	: <i>BOX</i>)	6901 Thomas Dr. Unit 24	
	Panama City Beac	r. FL 32408	
agent and/or the new registered office addre	_		ords, enter the name of the new registere
New Registered Office Address:	6901 Thomas D		
			street address
	Panama City B		, Florida 32408
New Registered Agent's Signature, if changing	Registered Agent:	Cîty E	Zip Code
I hereby accept the appointment as register provisions of all statutes relative to the propaccept the obligations of my position as reg	ed agent and agr per and complete	ree to act in this cap performance of m	duties, and I am familiar with and

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited Habitary

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
AP	Lisa Dallas	2508 Pelican Bay Dr.	
		Panama City Beach, FL 32408	■Remove
			□ Change
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lt an effec <u>Note:</u> I	te, if other than the date of filing:	0207 (ed as t
e record rd is file	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	the
Dated _	per 22 2021	
	b 1 h	

Typed or printed name of signee