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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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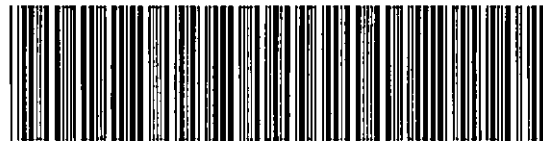
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

A. BUTLER

OCT 12 2022

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AJ CAPTIVA, 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 03/21/2022 and assigned
Florida document number L21000080940.

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."

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 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:

O'Halloran & Simmons, PLLC

New Registered Office Address:

1633 PERIWINKLE WAY, SUITE A

Enter Florida street address

SANIBEL

, Florida 33957

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.

If Changing Registered Agent, Signature of New Registered Agent

*Augustin G. Simmons 06/10
O'Halloran & Simmons, PLLC*

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	IRR TRUST ABC2 OF HW	8319 RUDDER FALLS WAY	<input type="checkbox"/> Add
	<u>STOWERS FBO 535 Brock</u>	KNOXVILLE, TN 37919	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	HW STOWERS ITA2 GST	8319 RUDDER FALLS WAY	<input checked="" type="checkbox"/> Add
	<u>EXEMPT FBO 535 Brock</u>	KNOXVILLE, TN 37919	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated June 23, 2022 2022

Sarah Ferning, Stowes Brook Co-Trustee
Signature of a member or authorized representative of a member

Sarah Jennings Stowers Brock, Co-Trustee

Typed or printed name of signee

Filing Fee: \$25.00