To: 18506176383 From: 19165766992 Date: 04/21/21 Time: 7:08 PM Page: 02/05

3/23/2021

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PARASEC Account Number : I20180000086 Phone : (916)576-7000 Fax Number : (800)603-5868

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

Email Address: RLOPS@PARASEC.COM

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To: 18506176383 From: 19165766992 Date: 04/21/21 Time: 7:08 PM Page: 03/05

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NJ (Name of the Limited Liability ((A Florida Lim	Lineage I.L.C Company as it now appears on our records. ited Liability Company)
The Articles of Organization for this Limited Liability Co	mpany were filedom 3/2021 02/23/2021 and assigned
Florida document number 1000089873	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and comainords "Limited I	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 ADD	RESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or reg	istered office address on our records, enter the name of toddress here:
Name of New Registered Agent:	APR TI
New Registered Office Address:	Enter Florida street address
	, Florida 🙃 🙃
	City Zig Zode

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 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

To: 18506176383 From: 19165766992 Date: 04/21/21 Time: 7:08 PM Page: 04/05

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

<u>Title</u>	<u>Name</u>	<u>Addres</u> s	Type of Action
			Add
			☐ Remove
			[] Change
		□ Remove	
		☐ Change	
			□ Add
		☐ Remove	
		☐ Change	
		☐ Add	
		☐ Remove	
		☐ Change	
			Add
			☐ Remove
			☐ Change
			☐ Add

__

Remove

_____ Change

To: 18506176383 From: 19165766992 Date: 04/21/21 Time: 7:08 PM Page: 05/05 D. If amending any other information, enter change(s) Kettach additional sheets, if necessary.) Amend article 3 for the business purpose to be: Long and short-term vacation rentals E. Effective date, if other than the date of filing: (optional)

(If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (Control of the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as th document's effective date on the Department of State's records. 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.

Page 3 of 3

Cyrene Douglas-Mills

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Typed or printed name of signee