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	gistration So vision of Cor			
SUBJECT:		ntal Campers LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ondence concerning this matter	_	
		Charles E. Sutherland		
			Name of Person	
		Sutherland Brown Manage	ement LLC	
			Firm/Company	, , , , , , , , , , , , , , , , , , ,
		PO Box 110956		
			Address	
		Carrollton, TX 75011		
		Charles ES wharland Commit	City/State and Zip Code	·
		CharlesESutherland@gmail E-mail address: (to be used for future annual repo	ort notification)
For further i	nformation c	concerning this matter, please c	all:	
Charles E. S	lutherland		214 232-79	
	Name o	f Person	at () Area Code	Daytime Telephone Number
Enclosed is a	a check for th	he following amount:		
□ \$25.00 I	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)
	iling Addres		Street Addre Registratio	
Di	vision of C	Corporations	-	f Corporations
P.0	D. Box 632	27		e of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Charles E. Sutherland To Confidence (Name of the Limited Liability Compa) (A Florida Limited)	tol Complexs University Company)	<u>LC</u>
The Articles of Organization for this Limited Liability Company Florida document number L21000090767	were filed on February 23, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Concrete Rock Stars LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5000 Guernsey Rd	·2
(Principal office address MUST BE A STREET ADDRESS)	Pace, Florida 32571	2022 DE SECK
	5000 Guernsey Rd	EC -5 M
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) Pace, Florida 32571	DE STATE	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter</u>	the name of the new registered
New Registered Office Address:	Enter Florida street addres	· · · · · · · · · · · · · · · · · · ·
	Flo	orida
	Cuy	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		,
I hereby accept the appointment as registered agent and agr	ree to act in this capacity. I fu	rther 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

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>	Type of Action
AMGR	Judith A Brown	5000 Guernsey Rd	
		Pace, Florida 32571	□Remove
			■ Change
			□Add
			Remove
			□ Change
			□Add
		 	□Remove
		·	□Change
			□Add
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factive data if other than th	a duta of filing:			(a	ntional)	
fective date, if other than the uneffective date is listed, the date mote: If the date inserted in this becament's effective date on the I	olock does not me	et the applicat	date of filing or role statutory filing	nore than 90 days ag requirements.	after filing.) Pursua this date will not	nt to 605,0201 be listed as
ccord specifies a delayed effecti is filed.	ve date, but not a	n effective tim	e, at 12:01 a.m.	on the earlier of	f: (b) The 90th (day after the
November 30		2022	_ •			
	Signature of a mo			(·
\sim	Signature of a me	ember or authori	ized representativ	e of a member		

Filing Fee: \$25.00