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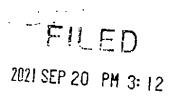
то:	Registration Se Division of Cor			•			
CHID IEA		HCM HOLDINGS OF JACKSONVILLE, LLC					
SUBJEC	Name of Limited Liability Company						
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn all correspo	ndence concerning this matter	to the following:				
		WILLIAM HENDRIX					
			Name of Person				
		SECC, LLC					
		<u></u>	Firm/Company				
		3545 ST JOHNS BLUFF I	RD S				
			Address				
		JACKSONVILLE, FL 322	24				
		jbcmoperations@gmail.com	City/State and Zip Code				
			to be used for future annual report n	otification)			
For furth	ner information co	oncerning this matter, please ca	all:				
WILLIAM HENDRIX		904 239-8485 at ( )					
	Name of	f Person		time Telephone Number			
Enclosed	d is a check for th	ne following amount:					
<b>=</b> \$25.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address Registration S	Section	Street Address: Registration S	Section			
Division of Corporations P.O. Box 6327			Division of C The Centre o				

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



HCM HOLDINGS OF JACKSONVILLE, LLC

SECRETARY OF STATE

(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 Liab		ere filed on (14/10	5/2021	and assigned
Florida document number L21000177910				
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of the	he limited liabili	y company her	2:	
The new name must be distinguishable and contain the work	ds "Limited Liability	Company," the des	gnation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicah	ole:			
(Principal office address MUST BE A STREET	ADDRESS)			
	-	<u> </u>		
Enter new mailing address, if applicable:	-			
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u> _			
	-			
B. If amending the registered agent and/or reg	istered office add	lress on our rec	ords, <u>enter the nan</u>	ne of the new registered
agent and/or the new registered office address l	<u>here</u> :			
Name of New Registered Agent:				
New Registered Office Address:		<u> </u>	<del></del>	
regimered office regices.	<u> </u>	Enter Florida	street address	
	_ <u>_</u>		, Florida	Zip Code
N. B. L. L. L. B. C.		City		Zip Code
New Registered Agent's Signature, if changing Reg				
I hereby accept the appointment as registered of provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the region company has been notified in writing of this change in the region.	and complete pe red agent as pro gistered office ad	rformance of m vided for in Cha	v duties, and Lam <sub>o</sub> inter 605. F.S. Or	familiar with and if this document is
company has oven nonquea in writing of this Ch	unge.			

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
MGR	RYAN MCGEE	3221 BRACHENBURY LANE	
		JACKSONVILLE, FL 32224	\exists Remove
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ective date if other than the d	ate of filing:		(or	ntional)	
ective date, if other than the discretive date is listed, the date must be: If the date inserted in this blocument's effective date on the Deput	ck does not meet the a	applicable statutory	or more than 90 days at filing requirements. I	her filing.) Pursuant to 605 his date will not be liste	.020 ed a
cord specifies a delayed effective s filed.	date, but not an effec	tive time, at 12:01 a	.m. on the earlier of:	(b) The 90th day after	r the
ed September 15	2021	·			
- Ing					