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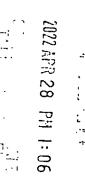
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BYRDNEST RECOVERY HOUSE LLC Name of Limited Liability Company
Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Anglia Byrch
Name of Person
Firm/Company
2011 Hartwell Ave
SANFORD, FL 30771 City/State and Zip Code Dyrdnes + 2011 & yahvo.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hame of Person at (321), 377-1204 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$\frac{1}{2}\$\$\text{S25.00 Filing Fee} \\ \text{Certificate of Status} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \\ \text{Description of Status} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \\ (additional copy is enclose

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Byrdnest Rec	OVL TY iability Compar	1-10usc,	LLC i on our records.)	2022 APR 28 PM 1:	06
The Articles of Organization for this Limited Liabil Florida document number $\angle 21000189$	ity Company i	were filed on	11201209	and assigned	ĬΞ
This amendment is submitted to amend the following	ig:				
A. If amending name, enter the new name of the Byrch lest Recover the new name must be distinguishable and contain the words. Enter new principal offices address, if applicable to the first terms of the second s	Cry Li "Linhted Liabili ::			the abbreviation "L.L.C,"	
(Principal office address MUST BE A STREET A	<u>DDKESS)</u>				
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BO)</u>	<u>r)</u>				
B. If amending the registered agent and/or regis agent and/or the new registered office address he		ddress on our re	cords, <u>enter the</u>	name of the new register	<u>-ed</u>
Name of New Registered Agent:					
New Registered Office Address:		Enter Flori	da street address		
			. Florid	a	

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.

City

Zip Code

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 Address Type of Action Title Name MGR Angela Byrd 2011 Hartwell Ave DAdd Sinford, FL 32771 Remove ☐ Change MER Lakeyoniss Byrd 2011 Hartwell Ave DANG Sanford FL 3271 DIRemove Angela Byrd 2011 HUYTHELLAVE ZAND Sanford FL 3271 - Remove _____ □Change AMBR Lakeyoniss Byrd 2011 Hartwell Ave BAdd Sanford, FL 32771 BREMOVE _____ □Change MGR NINA Byrcl 2011 Hartwell Ave gad SANFORD, FL 3077/ Remove ____ Change

□Remove

Effective date, if other than the date of filing: [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 603.0207 [one: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as focusinent's effective date on the Department of State's records, 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 distilled. Dated April 25 Augustus Signature of a mymber of authorized representative of a member. Amy Way Byreder printed name of signee.						
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