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O SIMMON -MAY 0 3 2021 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 787232 7828750 AUTHORIZATION COST LIMIT ORDER DATE: April 29, 2021 ORDER TIME : 9:49 AM ORDER NO. : 787232-005 CUSTOMER NO: 7828750 DOMESTIC AMENDMENT FILING NAME: ROCKY TAX, LLC EFFECTIVE DATE: XX ARTICLES OF AMENDMENT ____ RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY __ CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Eyliena Baker -- EXT#

COVER LETTER

	Registration Sec Division of Corp			
end ie		TAX LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The encle	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspor	idence concerning this matter	to the following:	
		Lore	T. Wise	
			Jen Bose Firm/Company	
		200 5.	Park Road, Ste	e. 425
		Holly	City/State and Zip Code	33021
		Loretta Col	Lienbase. Com	cation)
For furth	ter information co	oncerning this matter, please of	at (954) 417	-1342- Telephone Number
	Name of	1 013011	Aca code Dayane	reseptione transpor
Enclosed	l is a check for the	e following amount:		
■ \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	<u>u</u>	Street Address:	
	Registration S	ection	Registration Sect	
	Division of Co		Division of Corp	
	P.O. Box 6327 Tallahassee F		The Centre of Ta	Illahassee Street Suite 810
			7413 N RAMPAG	

Tallahassee, FL 32303

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

2521 APR 30 PH 12: 26

		- ,	= 20
ROCKY TAX LLC			
(Name of the Limited Liability Compan (A Florida Limited L.	ny as It now appe	ears on our records.)	
(A) fortida cilinated E.	maoring Company	,	
The Articles of Organization for this Limited Liability Company	were filed on _	April 20th, 2021	and assigned
lorida document number			
iorida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company	<u>here</u> :	
he new name must be distinguishable and contain the words "Limited Liabili	ity Company," the	e 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)			<u>. </u>
		 -	
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our	records, <u>enter the na</u>	me of the new regist
Name of New Registered Agent:			
New Registered Office Address:			
	Enter F	lorida sıreet address	
		, Florida	
	City		Zip Code

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

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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	LBFL 2021-FTB, LLC	200 S PARK ROAD - STE 425 - HOLLYWOOD, FL	_ ∃ Add
			_ □Remove
			_ Change
MGR	LB FLORIDA 2021, LLC		_ 🗆 Add
		200 S PARK ROAD - STE 425 - HOLLYWOOD, FL	BRemove
			□Change
			□Add
			□Remove
			_ Change
			□Add
			_ CRemove
			_ Change
			_ □Add
			□Remove
			Change
			□Add
	•		□Remove
			_ □ Change

lf amen	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	2#21 APR 30 PM 12: 26
_	
_	
ffective an effect Note: If	date, if other than the date of filing: (optional) ive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
	t's effective date on the Department of State's records.
record s	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	April 29th 2021
	Signature of a member or autiphized representative of a member
	JOSHUA W. SCHRAGER, MGR.
	Typed or printed name of signee

Filing Fee: \$25.00