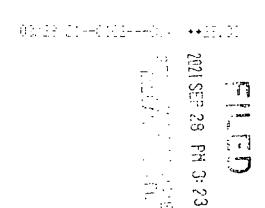
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COVER LETTER

TO:

Registration Section
Division of Corporations

	ancellor Drive, LLC		
SUBJECT:	Name of Lim	nited Liability Company	_
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Hannah G. Kitz		
	-	Name of Person	
	Lukins & Annis, P.S.		
		Firm/Company	
	717 W Sprague Ave., Ste	1600	
		Address	
	Spokane, WA 99201		
		City/State and Zip Code	2021 377 1
	hkitz@lukins.com		SE
	E-mail address; (to be used for future annual report notification)	2021 SEP 28 SEPLEAL
For further information	n concerning this matter, please c	all:	
Hannah G. Kitz		509 623-2005	- P
Nam	e of Person	Area Code Daytime Telephone Nu	imber ()
Enclosed is a check fo	r the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fee, ifficate of Status & iffied Copy tional copy is enclosed)
P.O. Box 6	n Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Sui	ite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7594 Chancellor Drive, LLC (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 Liability Company were filed on $\frac{07/20/2021}{1}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

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>	Address	Type of Action
MGR	GDH Investments, LLLP		□Add
	a Washington limited liability limited partnership		DAGG
			Remove
			□ Change
MGR	JDH Capital, LLLP,		🗆 Add
	a Nevada limited liability limited partnership		
			=Remove
			□Change
MGR	George Hansen	PO Box 4186, Spokane, WA 99220	= Add
			□Remove
MGR	Joseph Hansen	711 S. Carson Ste 4. Carson City, NV 89701	Se S
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			□Add
			□Remove
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ective date, if other than the date in effective date is listed, the date must be space. If the date inserted in this block document's effective date on the Department.	oes not meet the applicable statute	(optional) ling or more than 90 days after filing ory filing requirements, this date	.) Pursuant to 605.03 will not be listed
ecord specifies a delayed effective date is filed.	, but not an effective time, at 12:0	01 a.m. on the earlier of: (b) The	ne 90th day after tl
September 24th	. 2021		
7/m/1/k	w		