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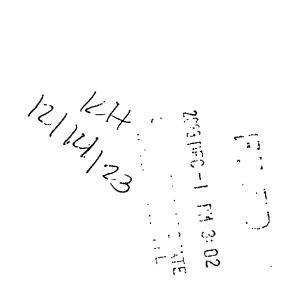
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COVER LETTER

JBJECT:	Name of Lin	nited Liability Company	
e enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
ease return all correspo	ondence concerning this matter	to the following:	
	Brian Sawyer		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	1680 ATA STE 3 LLC		
		Firm/Company	
	1680 HWY A1A, STE 3		
		Address	
	SATELLITE BEACH FL	32937	
		City/State and Zip Code	
	DBLSPROPERTIES@GM		
	E-mail address: (to be used for future annual report notifical	tion)
further information c	oncerning this matter, please c	all:	
ian Sawyer		877 344-3257 ar ()	
Name o	f Person	Area Code Daytime Te	elephone Number
closed is a check for th	ne following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

0:

Registration Section Division of Corporations

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**

1680 ATA STE 3 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 8/25/2021 and assigned

Florida document number L21000381037		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or th	e 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 agent and/or the new registered office address here:	address on our records, enter the n	ame of the new registered
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	7:1 2
 _	, Florida	
	City	Zip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added r removed from our records:

4GR = Manager
MBR = Authorized Member

<u>`itle</u>	Name	<u>Address</u>	Type of Action
AGR	Howard L Garris, Jr.	69 Anchor Dr, Indian Harbour Beach FL	□Add
			Remove
			□Add
			□Remove
			Change
<u></u>			□Add
			[]Remove
			□ Change
			DAdd T
			□ Remove
			Change
			☐ Change
<u></u>			□ Add
			□Remove
			□ Change

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	tive date, if other than the date of filing: 11/15/2023 (optional))207 (
(If an ef Note:	ffective 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 695.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed nent's effective date on the Department of State's records.	i as t
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(If an ef Note: docun	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.	i as t

Filing Fee: \$25.00