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Division of Corporations

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From:

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PUFFIN 4, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PUFFIN 4, LLC			
(Name of the Limited Liability (A Florida L	Company as it now annears on our records.) Limited Lubility Company)		
The Articles of Organization for this Limited Liability Con	mpany were filed on 09/23/2021	and as	signed
Florida document number L21000419532	÷		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limits	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the	abbreviation "l	.LC."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	255)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of sent and/or the new registered office address here:	office address on our records, enter the na	ime of the ne	<u>w registered</u>
Name of New Registered Agent:		<u> </u>	202
New Registered Office Address:			H A
	Enter Florido street address		- T
	, Florida		
Now Registered Agent's Signature, if changing Registered	City Ament:	Eip Code	<u> </u>
THE PERSON OF THE PROPERTY OF THE PROPERTY OF THE PERSON O	CANUL CONTRACTOR OF THE CONTRA		- -

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

(((H220001721703)))
If ametiding Authorized Person(s) authorized to manage, enter the title, name, and address of each person bring added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	INGRID G. MARIA VOSSEBELD	P.O. BOX 1236	□Add
		HERNANDO, FLORIDA 34442	BRemove
			C) Chunge
			DAdd
			© Remove
			□Change
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			(DAdd
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			Change
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			□ Cheeses

(((H22000172170 3)))

e a	rending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
iote	ctive date, if other than the date of filing;
rec ib	ard 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 filled.
ate	William.
	Signature of a examples or authorized representative of a marpher
	ANTONIUS VAN USEN

Filing Fee: \$25.00