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Date: 12/0	08/2021	
Name:	Merritt Walker	_
Reference #:	1547063	_
	GRIFF	MAIER, LLC
	Incorporation/Authorization	
✓ Amendme	ent	
Change of	f Agent	
Reinstaten	ment	
Conversion	n	
☐ Merger		
Dissolution	n/Withdrawal	
☐ Fictitious N	Name	
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GriffMaier, LLC

DocuSign Envelope ID: 7D4A03DC-BAFE-4E2D-B8E3-A2C6A04EC1BB ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on our rec liability Company)	ords.)			
The Articles of Organization for this Limited Lia Florida document number L21000454015	ibility Company	were filed on 10/18/2021		;	and ass	igned
This amendment is submitted to amend the following	wing:					
A. If amending name, enter the new name of	the limited liabi	ility company here:				
The new name must be distinguishable and contain the we	rds "Limited Liabil	ity Company," the designation "I	.I.C" or th	e abbrevia	ition "L.	L.C."
Enter new principal offices address, if applica	ble:	45 Magnolia Dunes Drive				
(Principal office address MUST BE A STREET		Inlet Beach, FL 32461				
Enter new mailing address, if applicable:		45 Magnolia Dunes Drive				
(Mailing address MAY BE A POST OFFICE B	Julia Danak III 22 (4)					
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:		ddress on our records, <u>en</u>	ter the n	ame of (he nev 2021 DEC	v registered
New Registered Office Address:	45 Magnolia Du	ines Drive	_	3.25	ၓ	5.40-4
New Registered Office Address.	Inlet Beach	Enter Florida street ade	dress Florida	25.00 5.00 5.00 5.00 5.00 5.00 5.00 5.00	AM 9:	D
		City	rioriga	T Zij	o Code	
New Registered Agent's Signature, if changing Re	egistered Agent:					
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this c	r and complete tered agent as p egistered office	performance of my duties, provided for in Chapter 60	and La. 5. F.S. C	m famil. Or, if thi	iar wit s docu	h and ment is

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 7D4A03DC-BAFE-4E2D-B8E3-A2C6A04EC1BB it amending Authorized rerson(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
		 	\ \Add
			Remove
			Change
			
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ffective date, if other than	the date of filing: must be specific and cannot be s block does not meet the	applicable statutory fil	(optional more than 90 days after filiting requirements, this days	al) ng.) Pursuant to 605,0207 ate will not be listed as
an effective date is listed, the date ote: If the date inserted in thi ocument's effective date on the		cords.		
ote: If the date inserted in thi	e Department of State's re		s. on the earlier of: (b)	The 90th day after the
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effe	e Department of State's re- ctive date, but not an effee		a. on the earlier of: (b)	The 90th day after the
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effect is filed. December 8,	e Department of State's receive date, but not an effective date date, but not an effective date date, but not an effective date date date date date date date dat	etive time, at 12:01 a.n		·
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effect is filed. December 8,	e Department of State's receive date, but not an effec	etive time, at 12:01 a.n		·

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