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T. MATTHEWS NOV 2 2 2021

COVER LETTER

Ruth Management LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Courtney Miller Name of Person Finn/Company 37 Sandra Drive Address Jacksonville Beach, Fl 32250 City/State and Zip Code courtneynicole2@outlook.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Courtney Miller Name of Person Name of Person Daytine Telephone Nu	
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Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fee, tificate of Status & tified Copy titional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Sui	ite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ruth Management LLC

21 H3: 12 PH 3: 42

(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 I	Liability Company were	e filed on	and assigned
Florida document number <u>L21000458063</u>			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability	company here:	
The new name must be distinguishable and contain the	words "Limited Liability Co	ompany," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		,	<u> </u>
B. If amending the registered agent and/or agent and/or the new registered office address.		ess on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:	Courtney Miller		
New Registered Office Address:			
		Enter Florida street address	
		Flori	da
		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

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 21 1/2 1/2 1/2 1/2	Type of Action
AR	Courtney Miller	2\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u></u> ≅ Add
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ective date, if other than	the date of filing:	(optional)	5 A 2 A 2 (1)
		date of filing or more than 90 days after filing.) Pursuant to 605 le statutory filing requirements, this date will not be list	
	e Department of State's records.		
	ctive date, but not an effective time	e, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
is filed.			
ted 11 /07 /20:	<u>- </u>		
	Ch. to	7 /	
	Signature of amember or authoris	magnetive of a member	
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	CHRISTOPHER N. Typed or printed	1FALEO	