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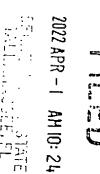
(Requestor's Name)	
(Address)	
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PICK-UP WAIT MAIL	-
(Business Entity Name)	
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	Heacock Public Investments, LLC					
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed Ar	rticles of A	amendment and fee(s) are sub	mitted for filing.			
Please return all	correspon	dence concerning this matter	to the following:			
		Margie Marsh				
			Name of Person			
		Dentons Strote PC				
	Name of Limited Lability Company ed Articles of Amendment and feets) are submitted for filing. In all correspondence concerning this matter to the following: Margie Marsh					
Substituted Liability Company The enclosed Articles of Amendment and feefs) are submitted for filing. Please return all correspondence concerning this matter to the following: Margie Marsh						
			Address			
		Birmingham, Al. 35205				
			City State and Zip Code			
		F-mail address: ()	to be used for future annual report note	fication)		
For further infor	rmation co	ncerning this matter, please ca	all;			
			at ()			
	Name of	Person	Area Code Daytim	e Telephone Number		
Enclosed is a ch	eck for the	following amount:				
■ \$25.00 Filie	ny Fee	•	Certified Copy	Certificate of Status & Certified Copy		
-						
	ion of Co 3ox 6327	•	The Centre of T	•		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

FILED

2022 APR -1 AM 10: 24

Heacock Public Investments, LLC (Name of the Limited Liability Company as it now appears on our records
(A Florida Limited Liability Company) ____ and assigned Florida document number 1.21000471050 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 "LLC" 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. Thereby 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	Type of Action
MGR	David R. Heacock	2745 S Olive Ave	
		West Palm Beach, FL 33405	□Remove
			Change
			□Add
			□Remove
		. 	□ Change
			□Remove
			∏Change
			□Add
			TRemove
			□ Change
			□Remove
			□Add
			□Remove
			□ Change

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ective date, if other than the data effective date is listed, the date must be te: If the date inserted in this block nument's effective date on the Department's	specific and cannot be prid does not meet the appl	cable statutory filing rec	(optional) han 90 days after filing) Pursu quirements, this date will no	ant to 605,020 of be listed a
cord specifies a delayed effective da s filed.	de, but not an effective	time, at 12:01 a.m. on th	ne earlier of: (b) The ⁹ 0th	day after the
ed March 31	2022	·		
Daw A. He	wil	horized representative of a		

Filing Fee: \$25.00