## L21000473831

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2029 JUL 24 AM 9: 04

## **COVER LETTER**

Registration Section

TO:

Division of Cor	porations '	• •	•					
RUN JMC SUBJECT:	LLC							
30b3EC1.	Name of Lim	ited Liability Company						
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.						
Please return all correspo	ondence concerning this matter	to the following:						
	Daniel A Jacobson							
		Name of Person						
	Daniel A. Jacobson, PA							
	<del></del>	Firm/Company						
	901 S Federal Highway, S	uite 201						
		Address	<del></del>					
	Fort Lauderdale, FL 33316	, 1						
	<del>-</del>	City/State and Zip Code	_					
	dan@leanttitle.com	·						
Con former in formation o		to be used for future annual report not	ilication)					
	oncerning this matter, please c	2117						
Dan Jacobson		954 632-5858 at ( )						
Name o	f Person		ne Telephone Number					
Enclosed is a check for the	ne following amount:							
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)					
Mailing Address Registration S	Section	Street Address: Registration Se						
Division of C P.O. Box 632	-	Division of Co The Centre of						
Tallahassee, I			pe Street, Suite 810					

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

RUN JMC 1 LLC

F/LED 2023 JUL 21, AM 9: 05

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

·	naomy company,	TALLAHASSEE AND ASSIGNED
The Articles of Organization for this Limited Liability Company	were filed on 11/02/2021	and AssleAed
Florida document number 1.21000473831		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
SGH Holdings 1 LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	1"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a	ddress on our records,	enter the name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	address	
		. Florida
	City	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agra	re to act in this capacity	: I further agree to comply with th

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	Type of Action
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			Remove
			□Change
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is filed.	s a delayed effectiv								th day a	fter the
ated	July 13 Josep		. <u>2073</u>	<u>3</u> .						
	/) /	7!-1 7	,							
	<u> </u>	Signature of a	member or au	thorized repr	resentative o	a member				