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## **COVER LETTER**

Division of Co	rporations		<b>F</b>
PEOPLES SUBJECTS.	CHOICE STORAGE HIGH S	PRINGS, LLC	•
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing	
Please return all correspo	ondence concerning this matter	to the following:	
	JOHN SCOTT DAHIN		
		Name of Person	<del></del>
	TRICORE INVESTMENT	FGROUP, LLC	
		Firm Company	
	999 Douglas Avenue Suite	: 3318	
		Address	
	Altamonte Springs, FL 32	714	(a N
	scott@tricoreig.com	City State and Zip Code	021 DEC 14 AM 10: 1
	E-mail address:	to be used for future annual report notification)	
For further information c	oncerning this matter, please c	all:	
John Scott Dahin		407 388-4418	7 5
Name o	f Person	Area Code Daytime Telephor	ie Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	S60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration Section	
Division of C		Division of Corporation	S

P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Peoples Choice Storage High Springs, LLC

(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 Liability	Company were filed on Novemb	er 02, 2021 and assigned
Florida document number 1.21000475841	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
	<del></del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<del>-</del>
B. If amending the registered agent and/or register	nd affina addraw an arm manand	or and on the many of the many of the
agent and/or the new registered office address here:	en omice andress on our record	s. enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
registed viries (waters).	Enter Florida str	vet address
		Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agend provisions of all statutes relative to the proper and a accept the obligations of my position as registered a	complete performance of my di	uties, and I am familiar with and
being filed to merely reflect a change in the register company has been notified in writing of this change	ed office address, I hereby con	girm that the limited liability

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	TriCore Investment Group, LLC	999 Douglas Avenue Suite 3318	€Add
		Altamonte Springs, FL 32714	□Remove
	Ś	97	□Change
MGR	John Scott Dahin	999 Douglas Avenue Suite 3318	
		Altamonte Springs, FL 32714	=Remove
			□Change
			□Remove
		<del> </del>	□Change
			□Add
			□Remove
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Effective date, if other than th	e date of filing:		tantiana)	
	ast be specific and cannot be prior to	o date of filing or more than 90 o ble statutory filing requirem	(optionar) lays after filing.) Pursuant to 605.0 ents, this date will not be listed	207 (1 Las th
(If an effective date is listed, the date mu Note: If the date inserted in this b	Department of State's records			
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(If an effective date is listed, the date mu- Note: If the date inserted in this bi- document's effective date on the I	Department of State's records,	ne, at 12:01 a.m. on the earli	er of: (b) The 90th day after t	he
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