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COVER LETTER

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SUBJE		c source L.L.C.		,	
301312	· ·	Name of Lim	ited Liability Company		
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	return all correspo	ondence concerning this matter	to the following:		
		Filing Yolanda			
			Name of Person		
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\$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status Certified Copy cadditional copy is enclos	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATIONE D OF

2021 DEC 27 AH 7: 35

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now adpears parour records, I Liability Company) LAHASSEE, F	u E L
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.21000498957}{1.21000498957}$	were filed on 11/19/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6152 SW State Rd 200	
Principal office address MUST BE A STREET ADDRESS)	Unit 111	
•	Ocala, FL 34476	
Inter new mailing address, if applicable:	5906 NW 65th st	
Mailing address MAY BE A POST OFFICE BOX)	Ocala, FL 34482	
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here		enter the name of the
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	P P	
	Enter Florida street address	
	Flori	i da 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>	Name	Address	Type of Action
			Add
			□ Remove
			□ Change
			□ Remove
			Change
			🗖 Add
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Effective date, if other than the flan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and cannot be prior to block does not meet the applicab	date of filing or more than 90 days	optional) after filing.) Pursuant to 605.0207 (2 , this date will not be listed as th
he record specifies a delay The 90th day after the re		an effective time, at 12:0	01 a.m. on the earlier of:
Dated	2021	.•	
/s/ Joshua Hall			
	Signature of a member or authorize	ved representative of a member	
Joshua Hall, Member			
	Typed or printed	name of signee	

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Filing Fee: \$25.00