L22000048937

(Req	uestor's Name)	
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COVER LETTER

	ision of Cor				
SUBJECT:		District Developers, LLC			
ocoober.		Name of Lim	ited Liability Company		
The enclosed	d Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Stephanie Burch			
			Name of Person		
	Concept Development, Inc.				
	FirmeCompany				
		1449 SW 74th Drive, Suite 200			
			Address		
		Gainesville, FL 32607			
			City/State and Zip Code		
		sburch@conceptcompanies.	net to be used for future annual report notifi	ication)	
For further in	nformation c	oncerning this matter, please co	all:		
Stephanie Br	urch		904 610-3333 at ()		
Name of Person Area Code Daytime Telephone Numb		Telephone Number			
Enclosed is a	a check for th	e following amount:			
□ \$25,00 F		■ \$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 (additional copy is enclosed)	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Innovation District Developers, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Comparison of the Articles of Organization for this Limited Liability Comparison $\frac{1.22000048937}{1.22000048937}$.	ny were filed on January 27, 2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation "LLC" or the ab	breviation "L.L.C."
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 agent and/or the new registered office address here: Name of New Registered Agent:	100	
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agen	City it:	Zip Code St
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my duties, and I am f s provided for in Chapter 605, F.S. Or,	amiliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	321 Investment Group, LLC	321 SW 13th Street	■Add
		Gainesville, FL 32601	□Remove
			☐Change
MGR	Trimark Properties, LLC	321 SW Thirteenth Street	□Add
		Gainesville, FL 32601	Remove
			□Change
		□Add	
			□Remove
		□Change	
		□Add	
		□Remove	
		☐ Change	
		🗆 Add	
		□Remove	
			□Change
<u>-</u>			[]Add
		-	□Remove
			□Change

		
	<u> </u>	
		
		···
		
ffective date, if other than the an effective date is listed, the date muote: If the date inserted in this becoment's effective date on the I	lock does not meet the applicable statuto	(optional) ling or more than 90 days after filing.) Pursuant to 605,0207 (ory filing requirements, this date will not be listed as t
record specifies a delayed effecti- is filed.	re date, but not an effective time, at 12:0	It a.m. on the earlier of: (b) The 90th day after the
	2023	
May 19	··	
ated May 19	·	
ated May 19	Signature of a member or authorized tepres	sentative of a member

Filing Fee: \$25.00