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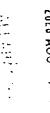
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO:

Registration Section

| Division of Corporations | | | |
|-------------------------------|--|---|--|
| SUBJECT: | HARRIS STIZ | 1420 LLC ited Liability Company | |
| The enclosed Articles of | Amendment and fec(s) are sub | mitted for filing. | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| ~· . | 1 | MICHEL HARRIS | |
| | | Name of Person | |
| | H | ARRIS STR 1420 | LLC |
| | | Firm/Company | |
| | d | 2160 CASREGR Address | OVE |
| | | Address | |
| | | NAVARRE FL. City/State and Zip Code RHAR72@YAH | 32566 |
| | 14. | City/State and Zip Code | |
| | E-mail address: (| to be used for future annual report no | oo. Com |
| For further information c | oncerning this matter, please c | , | |
| | | | |
| | HER HARRIS | at (<u>858</u>) <u>737</u> Area Code Dayti | - 8501 |
| Name o | f Person | Area Code Dayii | tine Telephone Number |
| Enclosed is a check for th | ne following amount: | | |
| ≥ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Addres Registration S | Section | Street Address: Registration S | |
| Division of C P.O. Box 632 | • | Division of Co The Centre of | • |
| Tallahassee, l | | | roe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| , , , , , , , , , , , , , , , , , , , | 5 STR 1420 LLC |
|---|---|
| (<u>Name of the Limited Liability</u> (A Florida l | Company as it now appears on our records.) |
| The Articles of Organization for this Limited Liability Co Florida document number <u>L 2200007706</u> | mpany were filed on $\frac{2/16/27}{8}$ and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limit | ed liability company here: |
| N/A | |
| he new name must be distinguishable and contain the words "Limite | ed Liability Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: 🙏 | 1/A |
| Principal office address MUST BE A STREET ADDRE | ESS) |
| Enter new mailing address, if applicable: \mathcal{N}/\mathcal{P} Mailing address MAY BE A POST OFFICE BOX) | |
| 3. If amending the registered agent and/or registered agent and/or the new registered office address here: | office address on our records, <u>enter the name of the new reg</u> i |
| N/n | |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |
| | , Florida |
| | City 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> | <u>Name</u> | Address | Type of Action |
|--------------|---------------|--|----------------|
| AMBR | SHELBY HARRIS | 2140 CASTLE GROVE VIII NAVARRE FL 32543 | (E/Add |
| | | VIII NAVARRE FL 32543 | □Remove |
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| | | | □Remove |
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| | iding any other information, enter change(s) here: (Attach additional sheets, if necessary.) \sim // |
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| cffe <u>te:</u> I | te date, if other than the date of filing: |
| s file | |
| ed_ | 8/2/23 |
| | Signature of a member or authorized representative of a member |
| | KAREN HARRIS |