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DIVISION OF CORPORATIONS
22 APR 13 ANIO 12

T. MATTHEWS MAY - 3 2022



zenbusiness

Apr 6, 2022

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: Magnolia Abodes LLC

To Whom It May Concern:

Attached please find the executed <u>CERTIFICATE OF AMENDMENT</u>, for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Kelly Castro 5511 Parkcrest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you.

Kelly Castro ZenBusiness Customer Success

ARTICLES OF AMENDMENT TO FILED STATE ARTICLES OF ORGANIZATIONS OF 22 APR 13 AMIO 13

Magnolia Abodes 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 $\frac{03/21/2022}{1}$ and assigned Florida document number $\frac{1.22000138516}{1}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 14109 9th Terrace NE Enter new principal offices address, if applicable: Bradenton, FL 34212 (Principal office address MUST BE A STREET ADDRESS) 14109 9th Terrace NE Enter new mailing address, if applicable: Bradenton, Fl. 34212 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

_, Florida _

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>	<u>Address</u>	Type of Action
AMBR	Elise Barron Lawson	14109 9th Terrace NE	DAdd
		Bradenton, FL 34212	□Remove
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ective date, if other than the da	ste of filing:		(ontic	onal)
n effective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Department.	e specific and cannot be p k does not meet the ap	orior to date of filing or plicable statutory fi	r more than 90 days after	Hiling A Pursuant to 605-020
ecord specifies a delayed effective d is filed.	ate, but not an effectiv	ve time, at 12:01 a.n	n. on the earlier of: (b) The 90th day after the
ted April 06	. 2022	<u> </u>		
/s/ Elise Barro	n Lawson			

Filing Fee: \$25.00