Florida Department of State Division of Carporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

	Address:			
E m ~ 1	Addroce:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ENJG LLC**

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JUN 23 2022 < Brumbley

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ENJG LLC		
(Name of the Limited Liability Comp (A Florida Limited)	nany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan		and assigned
Florida document number L22000264758		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lia</u>	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or the	abbreviation "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)		
	- April 1997	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, enter the na	me of the new register:
		202
Name of New Registered Agent:		· 2
New Registered Office Address:	Enter Florida street address	72 F2
	, Florida _	
	City	Zip Kode :-
New Registered Agent's Signature, if changing Registered Ager	ıt:	. 26

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 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	Eric Decker	7901 4th Street N STE 300	XlAdd
		ST. Petersburg FL 33702	□Remove
			□Change
AMBR	Jerry Upchurch Jr.	7901 4th Street N STE 300) XIAdd
		ST. Petersburg FL 33702	□Remove
			Change
			□Add
			□Remove
			□ Add
			Remove
			□ Change
			□Add
			□Remove
			□Change
			DAdd
			□Remove
			□Change

		L. CHERTIN.		
				
				
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Effective date, if other than the fan effective date is listed, the date must Note: If the date inserted in this blodocument's effective date on the De	ock does not meet the app	neable statutory nung i	(optional) than 90 days after filing.) I requirements, this date w	Pursuant to 605.0207 (fill not be listed as t
record specifies a delayed effective d is filed.	e date, but not an effective	e time, at 12:04 a.m. on	the earlier of: (b) The	90th day after the
1	2022	·		
Dated June 22				
	Signature of a member or as	Tak		

Filing Fee: \$25.00