LZZ 000 290 325

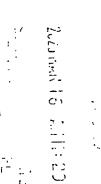
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600404130506

60/16/20 -01009--004 (*26.00



COVER LETTER

TO:

Registration Section Division of Corporations

	GH PINE LLC				
SUBJECT:	Name of Lii	mited Liability Company			
	Amendment and fee(s) are su	-			
Please return all correspo	ondence concerning this matte	r to the following:			
	Everett G. Svendsen				
Name of Person					
Firm/Company					
	PO BOX 14803				
		Address	 	1. E.	
Jacksonville FL 32238-1803					
		City/State and Zip Code		Zocolimik I	
	esrtp6493@gmail.com			۵٠	
	E-mail address:	(to be used for future annual report not	ification)	<u> </u>	
For further information concerning this matter, please call:			<u>.</u>		
Everett G Svendsen		904 477-7856 at ()	ı		
Name of Person Area Code Daytime Telephone Number				_	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate of Certified Copy (additional copy	f Status &	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address: Registration Se Division of Cor The Centre of T	porations		
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3970 HIGH PINE 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 _06/27/2022 and assigned Florida document number L22000290325 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 "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 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.

If Changing Registered Agent, Signature of New Registered Agent

_, 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	Jasper R Burr	5633 Swamp Fox Rd	= Add
		Jacksonville FL 32210	□Remove
			🗆 Change
			□ Add
			□Remove
			□Change
			Add Remove
			i☐Change
			Add
			□Remove
			□Change
			🗆 Add
			□ Remove
			□Change
			□Add
			Remove

_____ □Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) No E. Effective date, if other than the date of filing: ______ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. March 1 2023 Dated

Typed or printed name of signee

Everett G Svendsen