## L22000330660

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



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SECRETARY OF STATE

## CORPORATE ACCESS, \_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

| l  |      |  | WALK IN        |   |
|----|------|--|----------------|---|
|    |      | PICK                                       | UP: BROOK 7/25 |   |
|    |      | CERTIFIED COPY                             |                |   |
|    | XX   | РНОТОСОРУ                                  |                | _ |
|    |      | CUS  |                |   |
|    | XX   | FILING                                     | LLC AMEND      |   |
| 1. |      | SANDY SABER, LLC (CORPORATE NAME AND DOCUM | MENT #)        |   |
| 2. |      | (CORPORATE NAME AND DOCUM                  | MENT #)        |   |
| 3. | -    | (CORPORATE NAME AND DOCUM                  | MENT #)        |   |
| 4. | -    | (CORPORATE NAME AND DOCUM                  | MENT #)        |   |
| 5. | -    | (CORPORATE NAME AND DOCUM                  | MENT #)        |   |
| 6. | _    | (CORPORATE NAME AND DOCUM                  | IENT #)        |   |
|    | CIAL |  |                |   |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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| Sandy Saber, LLC  |   |   |
|---|---|---|
| (Name of the Limited Lia<br>(A Flor   | bility Company as it now appears on our records.) rida Limited Liability Company)   | TALLAHASSEE, FLORI                              |
| The Articles of Organization for this Limited Liability   | Company were filed on 05/16/2023  | and assigned                                    |
| Florida document number L22000330660  |   |   |
| This amendment is submitted to amend the following:   |   |   |
| A. If amending name, enter the new name of the li   | mited liability company here:   |   |
| Sandy Sabre, LLC  |   |   |
| The new name must be distinguishable and contain the words "L   | imited 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 ADI  | DAECC)  | · · · · · · · · · · · · · · · · · · ·           |
| Trincipal Office Busiess MOST BE ASTREET ADI  | DRESS)  |   |
|   |   |   |
| 77 d  |   |   |
| Enter new mailing address, if applicable:   |   | <del></del>                                     |
| (Mailing address MAY BE A POST OFFICE BOX)  | <u> </u>  |   |
|   |   |   |
|   |   |   |
| B. If amending the registered agent and/or register<br>agent and/or the new registered office address here  | ed office address on our records, <u>enter the</u>  | name of the new registered                      |
| The state of the new registered office address here   | •   |   |
| Name of New Registered Agent:   |   |   |
| Name of New Registered Agent:   |   | <del></del>                                     |
| New Registered Office Address:  |   |   |
|   | Enter Florida street address  |   |
|   | , Florid:   | a<br>Zip Code                                   |
|   |   | Zip Code  |
| New Registered Agent's Signature, if changing Register  | red Agent:  |   |
| hereby accept the appointment as registered agen<br>provisions of all statutes relative to the proper and<br>accept the obligations of my position as registered a<br>being filed to merely reflect a change in the register<br>company has been notified in writing of this change | complete performance of my duties, and I of<br>agent as provided for in Chapter 605, F.S.<br>red office address, I hereby confirm that th | am familiar with and<br>Or, if this document is |
| , , , , , , , , , , , , , , , , , , ,   |   |   |
|   |   |   |

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:

| or removed from our records:              | being adder |
|---|-------------|
| MGR = Manager<br>AMBR = Authorized Member |             |

| Title       | <u>Name</u> | Address | Type of Action |
|-------------|-------------|---------|----------------|
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| flective date, if other than the date   | of filing:                 |                           | (option                               | σÑ                      |
| an effective date is listed, the date must be sporte: If the date inserted in this block de | ecific and connot be prior | to date of filing or more | then 90 down after 51                 | ina i Barrama da 404 02 |
| ocument's effective date on the Departm   | aunt of State's records.   | ook aantory thing it      | sámu esuesata, mas o                  | are with mor be mated a |
| 1   |                            |                           |                                       |                         |
| record specifies a delayed effective date, is filed.  | but not an effective ti    | me, at 12:01 a.m. on (    | he earlier of: (b)                    | The 90th day after the  |
| ated July 25  | 2023                       |                           |                                       |                         |
| sted  |                            | _ <del>_</del> ·          |                                       |                         |
| 1 <i>64 - 20</i> 77   |                            |                           |                                       |                         |
|   |                            |                           |                                       |                         |
| Stuart P. Smith - Mou   | ure of a member or autho   | nized representative of a | member                                | <del></del>             |

Filing Fee: \$25.00