(((H24000201082 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624

Fax Number

: (512)597-0678

\*\*Enter the email address for this business entity to be used for future incommon temporal mailings. Enter only one email address please.\*\*

್ಲಿEmail Address:\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FITZWATER ST LLC

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## H24000201082 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fitzwater St LLC		
(Name of the Limited Liability Compa (A Florida Lunited	nny a <u>s it now appears on our records.)</u> Liability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Company	y were filed on <u>08/09/2022</u>	and assigned
Florida document number 1222000350464		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	offity company here:	
The new name must be distinguishable and contain the words "Lumted Liabt	hty Company," the designation "LLC" o	or the abbreviation "Lat., C."
Enter new principal offices address, if applicable:		1 m m²
Principal office address MUST BE A STREET ADDRESS)		24 See
Enter new mailing address, if applicable:	PO Box 87, Boydton, VA 23917	8 01.0 8 01.0 8 X883
Mailing address MAY BE A POST OFFICE BOX)		<b></b>
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Emer Floridastræetaddress	
	, Flori	
	City	ZipCode

## 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

\* Page: 3 of 4

MGR = Manager

2024-06-08 11:14:43 UTC+14

18506176383

From: ZenBusiness User

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	ABR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
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			🗆 Change		

* Page: 4 of 4	2024-06-08 11:14:43 UTC÷14	18506176383	From: ZenBusine
If amending any other in	formation, enter change(s) here: (Attach ode	litional sheets, if necesso	(y,t)
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			<b>57</b>
Effective date, if other the	an the date of filing:  ate must be specific and cannot be prior to date of filing or	(optiona	1)
(If an effective date is listed, the d. Note: If the date inserted in	ate must be specific and cannot be prior to date of filing of this block does not meet the applicable statutory f	rmore than 90 days after filin Hing requirements, this da	g.) Pursuant to 605.0207 (3)(b) to will not be listed as the
document's effective date or	the Department of State's records.		
the record specifies a de ) The 90th day after th	elayed effective date, but not an effective	e time, at 12:01 a.m	. on the earlier of:
The sould day after th	e record is filed.		
Dated June 4	2024		
/s/Terry Eggles	Signature of a member or authorized representa	-	
	Signiture of a member or authorized represents	ove of a bichiner	
Terry Eggleston			
	Typed or printed name of signe	· · · · · · · · · · · · · · · · · · ·	

To:

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