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From:

Account Name : ELLISON LAZENBY PLLC

Account Number : I20150000059

Phone : (727)362-6151 Fax Number : (727)362-6131

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

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EP/LLLP AMENDMENT/RESTATEMENT/CORRECTION EB 3365 CENTRAL AVE LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EB 3365 CENTRAL AVE LLC, a limited liability company (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 10/03/2022 ____ and assigned 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." 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 su eet 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

MGR = Manager

To.

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 = Authorized Member **Title** Name <u>Address</u> Type of Action MGR 262 4TH AVE. N. THE BLAKE WHITNEY THOMPSON COMPANY, LLC ST. PETERSBURG, FL 33701 ______ = Remove _____ UChange _____ ∐Remove _____ Change ______ Change ______ □Remove ______ Change _____ Remove

To:

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| E. Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in this document's effective date on the | s block does not meet the ap | plicable statutory filing r | than 90 days after filing.) Pursuant to equirements, this date will not be | o 605.0207 (3)(l e: listed as the |
| f the record specifies a delayed effer ecord is filed. | ctive date, but not an effecti | ve time, at 12:01 a.m. on | the earlier of: (b) The 90th day | after the |
| March 17 Dated | 2023 | · | | |
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Typed or printed name of signee