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A. RIVERS

FEB - 7 2023



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COVER LETTER

Registration Section
Division of Corporations

TO:

	DEVELOPERS LLC.	,	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	GENOVIS PETERSON		
		Name of Person	
	PPC LAND DEVELOPER	S LLC.	
		Firm/Company	
	P.O. BOX 9531		
		Address	
	JACKSONVILLE, FLORI	Name of Limited Liability Company fee(s) are submitted for filing. In this matter to the following: ETERSON Name of Person DEVELOPERS LLC. Firm/Company 31 Address ILLE, FLORIDA 32208 City/State and Zip Code ONTRACTING.COM mail address: (to be used for future annual report notification) atter, please call: at (
		City/State and Zip Code	
	INFO@CAPCONTRACTI		
	E-mail address: (to be used for future annual report not	lification)
For further information e	oncerning this matter, please c	all:	
GENOVIS PETERSON		at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Address Registration S Division of C	Section	Registration Se	
P.O. Box 632	<u>-</u>	The Centre of	Tallahassee
Tallahassee, l	FL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PPC LAND DEVELOPERS LLC	
(Name of the Limited Liability Company as (A Florida Limited Liabili	it now appears on our records.) ty Company)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L22000468443</u>	e filed on NOVEMBER 01, 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 Co	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Catana and malling address of applicables	0022 NO
Enter new mailing address, if applicable:	2
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	ess on our records, enter the name of the new segis
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code

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 a 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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Acti
MGR	PEGGY PETERSON JOHNSON	1115 EDGEWOOD AVENUE WEST	= Add
-		JACKSONVILLE, FLORIDA 32208	□Remove
			□Change
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Filing Fee: \$25.00