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## **COVER LETTER**

то:	Registration Sector Division of Corpo			
SUBJE	cr. Oak	. Street Roo	ts L.L.C.	
SUBJE	CI:(/ <u>A</u>	Name of Limi	ited Liability Company	
The end	closed Articles of Ar	nendment and fee(s) are subi	mitted for filing.	
Please	return all correspond	ence concerning this matter	to the following:	
		Kristin I	Name of Person	
			Firm/Company	<del> </del>
		16335 Ashin	ngton Park Dr. Address	<del> </del>
		Tampa, FL:	33647 City/State and Zip Code	
		Kristining Oce E-mail address: (1	9 Yahoo. Lom to be used for future annual report notificati	on)
For fur	ther information con	cerning this matter, please ca	all:	
<u> K</u>	ristin Try- Name of P	Davis	at (318) 542-9 Area Code Daytime Tel	ephone Number
Enclose	ed is a check for the	following amount:		
□ \$2	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address: Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	rporations	Street Address: Registration Section Division of Corpora The Centre of Talla 2415 N. Monroe St Tallahassee, FL 32	ations that the state of the st

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Uak Street Koo	ts, LLC	<del></del>	
(Name of the Limited Liability (A Florida L	Company as it now appears of imited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Cor Florida document number <u>L23000160137</u>		ren 6,2024	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company here	:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the desig	mation "LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			<del></del>
B. If amending the registered agent and/or registered of	office address on our reco	rds, enter the name o	f the new registered
agent and/or the new registered office address here:		•	
AL CAL D. L. LA			
Name of New Registered Agent:			<del></del>
New Registered Office Address:	Enter Florida	street address	
		, Florida	
<del></del>	City		Zip Code
New Registered Agent's Signature, if changing Registered	Agent:	့ တွ	29
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered	nplete performance of my nt as provided for in Cha	duties, and I am fam pter 605, F.S. Or, if t	ilia ivith and his document is
company has been notified in writing of this change.	2 <sub>9</sub> 9,22 audi 230, 1 (10, 20)	(1) 년 (2 전 (1) 전	a nabitity morn
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	WO. 1 B 1		
	If Changing Registered Agent,	, Signature of New Registe	red 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AR	Glenn Days Jr	19046 Bruce B Downs Blod	□Add
		Suite 162	Remove
		Tampa, FL 33647	Change
MGR	Kristin Ing-Davis	16335 Ashington Park Dr	XAdd
		Tampa, FL 33647	□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
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Effective date, if other than the date	of filing:			(optional)		
Effective date, if other than the date (If an effective date is listed, the date must be sp. Note: If the date inserted in this block d	pecific and cannot be oes not meet the a	applicable statuto	ing or more than 90 ory filing requiren	days after filing.	) Pursuant to	0 605.0207
(If an effective date is listed, the date must be sp	pecific and cannot be oes not meet the a	applicable statuto	ing or more than 90 ory filing requiren	days after filing.	) Pursuant to	605.0207 c listed as
(If an effective date is listed, the date must be spont in this block document's effective date on the Department record specifies a delayed effective date	pecific and cannot be oes not meet the a ment of State's re-	applicable statuto cords.	ory filing requiren	days after filing. nents, this date	) Pursuant to will not be	e listed as
(If an effective date is listed, the date must be sponter. If the date inserted in this block discourant's effective date on the Department record specifies a delayed effective date and is filed.	pecific and cannot be ones not meet the a ment of State's re-	applicable statuto cords. tive time, at 12:0	ory filing requirents	days after filing. nents, this date	) Pursuant to will not be ne 90th day	e listed as
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