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Registration Section

TO:

Division of Co	rporations		
ALI	VE BUILDERS LLC		
SUBJECT:	Name of Lin	nited Liability Company	
	Amendment and fee(s) are sub	-	
·	•	-	
	JOSEPH, J	OHNSON L, JR.	
		Name of Person	
	REGISTER	ED AGENT	
		Firm/Company	:~?
	1105 HAMMO	ND BLVD	
	(A. 11).	Address	· · ·
	JACKSO	ONVILLE, FL 32221	2
	Gator	City/State and Zip Code joe1974@gmail.com	
	E-mail address: (to be used for future annual report not	fication)
For further information of	concerning this matter, please c	all:	, ಆ.ಆ. -
Joe Johnson		904 545-878 at ()	
Name o	of Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 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 : Division of C	Section	<u>Street Address:</u> Registration Se Division of Cor	
P.O. Box 632	27	The Centre of T	allahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

DocuSign Envelope ID: B0C36649-D427-4FCD-9DBD-FC512B7EB9F8 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

AITHG BITTINGAS (16

nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the resistance of the res	-
the Articles of Organization for this Limited Liability Company were filed on	-
its amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: If amending name, enter the new name of the limited liability Company," the designation "LLC" or the abbreviation of the new principal offices address, if applicable: Enter new principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Inter new mailing address, if applicable: Inter new mailing address, if applicable: If amending the registered agent and/or registered office address on our records, enter the name of the registered address here: Name of New Registered Agent: New Registered Office Address:	"L.L.C."
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 inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the reent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	"L.L.C."
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New Registered Office Address:	ST.
New Registered Office Address:	<u>iew registe</u>
Enter Florida street address	
, Florida	
City Zip Coc	le [,]
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to convoisions of all statutes relative to the proper and complete performance of my duties, and I am familiar vecept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this dowing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liab ompany has been notified in writing of this change.	vith and cument is
ompany has been notified in writing of this change. If Changing Registered Agent, Signature of New Registered Agent, Signature of New Registered Agent.	

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II amenuing Authorized rerson(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
MGR	JOSEPH, JOHNSON L JR	1105 HAMMOND BLVD JACKSONVILLE, FL 32221	[XAdd
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			☐Change
			□Add
			□Remove
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