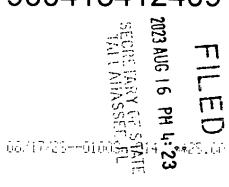
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COVER LETTER

| Division of Cor | | | |
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| SUBJECT: | breen Dry | ison Home and Lawn | |
| | Name of Limi | ted Usinitity Company | |
| The enclosed Articles of | Amendment and fee(s) are sub- | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | William | M. Davis | |
| | | Name of Person | |
| | | Firm/Company | |
| | 4921 | Galloway RpaD | |
| | | | |
| | Gracevi | Ne, FL 32440 | |
| | Hill davi | 11-e FL 3244D City/State and Zip Code 5 4921 @ Gmmi). Com to be used for future unual report notification) | |
| For further information c | oncerning this matter, please co | • | |
| William J | Davis | at (450) 844 - 376 3 Area Code Daytime Telephone Number | |
| name o | r Person | Area Code Daytime Teteprione Number | |
| Enclosed is a check for the | ne following amount: | | |
| □ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Certified Copy Certificate € Certified Co (additional copy is enclosed) | of Status & opy |
| Mailing Addres Registration 9 | | Street Address: Registration Section | |
| Division of C | | Division of Corporations | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Grun Dragon | Home and Lown LLC | |
|---|--|--------------|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our records.) Jahility Company) | |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L23CCO304COL</u> . | were filed on Lo 26 23 and ass | signed |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabil DAVIS HOME AND The new name must be distinguishable and contain the words "Limited Liabil | | |
| Enter new principal offices address, if applicable: | ity Company," the designation "L.C" or the abbreviation "L 4921 Calloway Roa Craceville, FL 32 | |
| (Principal office address MUST BE A STREET ADDRESS) | EVALLUITIE, FL 37 | <u> 190</u> |
| Enter new mailing address, if applicable: | Same as above | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | address on our records, enter the name of the ne | w registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address Florida Florida Zip Zide | m O |
| | 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 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 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 |
|--------------|-------------|-------------|----------------|
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| | nding any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| (If an effe <u>Note:</u> 1 | (optional) ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (2) of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that's effective date on the Department of State's records. |
| the record ford is file | specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d. |
| Dated_ | Angust 16 2023 |
| | Signature of a member or authorized representative of a member |
| | WILLIAM H. DAVIS |

Filing Fee: \$25.00