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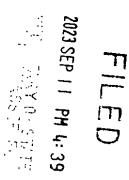
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COVER LETTER

TO:

Registration Section
Division of Corporations

	Fund LLC		
SUBJECT:	Name of Lin	nited Liability Company	
SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Calcifer Gardner Name of Person Firm/Company 1317 Edgewater Dr #7019 Address Orlando, FL 33804 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person at (
		Calcifer Gardner	
The enclosed Articles of American Please return all corresponder Name of Perence Section 1982 Se		Name of Person	
		Firm/Company	,,
	1317 Edgewater Dr #7019		
	0 1 17 22004	Address	
	Orlando, FL 33804	City/State and Zip Code	
	F-mail address:	to be used for future annual report no	tification)
-	concerning this matter, please c	•	
Name o	of Person	at () Area Code Daytin	me Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	•	Certified Copy	Certificate of Status & Certified Copy
Registration Division of C	Section Corporations 27	Registration Se Division of Co The Centre of	orporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Valuation Fund LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our red ited Liability Company)	cords.)
ne Articles of Organization for this Limited Liability Comp	pany were filed on 8/4/23	and assigned
orida document number L23000367975		
is amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
e new name must be distinguishable and contain the words "Limited	Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		2023 SE
nter new mailing address, if applicable:		SE TI
failing address MAY BE A POST OFFICE BOX)		
<u> </u>		2× - m
If amending the registered agent and/or registered off	fice address on our records, <u>en</u>	
ent and/or the new registered office address here:		3 6
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
		, 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 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Good Market LLC	1317 Edgewater Dr #7019	□Add
		Orlando, FL 32804	≡Remove
MGR	Road Capital LLC	1317 Edgewater Dr #7019	■Add
		Orlando, FL 32804	□Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

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Officialists of the State of th	ali i daga af Glima.		(4'1\)	
ffective date, if other than t an effective date is listed, the date i	must be specific and cannot be prior	to date of filing or more than 9	(optional) 00 days after filing.) Pursuant to 605	.0207
	s block does not meet the applicate Department of State's records.	ible statutory filing require	ements, this date will not be list	ed as
seament's effective date on the	e Department of State 3 records.			
record specifies a delayed effec	ctive date, but not an effective tir	me at 12:01 a.m. on the ea	urlier of: (b) The 90th day after	r the
l is filed.	our cauci our not an errective th	ne, at 12.01 a.m. on the co	and on (o) The your day und	
ated	12:01 a.m.	<u> </u>		
	1- On 1	,		
, ,		,		
	Signature of a member or autho	rived representative of a mon	1027	

Typed or printed name of signee