To: 18506176383 From: 19166105073 Date: 10/18/23 Time: 2:56 PM Page: 02/05

10/19/23, 9:53 AM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PARASEC Account Number : I20180000086

: (916)576-7000 : (800)603-5868 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: RLOPS@PARASEC.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 316 PROPERTY SOLUTIONS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

316 PROPERTY SOLUTIONS LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company vi	were filed on08/21/2023	and assigned
This amendment is submitted to amend the following:		<u></u>
A. If amending name, enter the new name of the limited liabil	lity company here:	-
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
(1) The Gall Office address in Co. 1 to 11 to 12)
Enter new mailing address, if applicable: (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 bere:	ddress on our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	Zφ Code
	City	Zφ 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
AMBR	Ashley Wilson	12159 BIG BAND CT	· ∑ I Add
		JACKSONVILLE FL 32224	Remove
			ETChange
			□Add
			□Remove
			□Change
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To: 18506176383 From: 19166105073 Date: 10/18/23 Time: 2:56 PM Page: 05/05

					
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voce; at m	late, if other than the deduction is listed, the date must be date inserted in this block offective date on the Dep	ex does not meet the ap-	dicable statutory fil	(option more than 90 days after finding requirements, this d	al) ing.) Pursuant to 605.02 ate will not be listed
record spe d is filed.	ecifies a delayed effective	date, but not an effectiv	re time, at 12:01 a.n	on the earlier of: (b)	The 90th day after the
ated	October 6	, 2023	·		
	(Juhley Wil	~ ~ ~		
-	S	ignature of a member or a	uthorized representati	ve of a member	

Filing Fee: \$25.00