(Requestor's Name) (Address)	
(Address)	600439049986
(City/State/Zip/Phone #)	2025 JAN SECRET TALLA
(Business Entity Name) (Document Number)	FILED 2025 JAN TO PH 4: 03 SECRETARY OF STATE TALLAHASSEE, FL
ecial Instructions to Filing Officer:	2025 JAN 10 PH 3: 18 A LAND A LANDAR AND A LAND A LANDAR AND A LAND A LANDAR AND A LAND A LANDAR AND
Office Use Only	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SERVICES CAPITAL FL III LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organizatio	on for this Limited Liability Company were filed	l on SEPTEMBER 22, 2023	_ and assigned
Florida document number	L23000440194		

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CRC X SOLUTIONS LLC

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The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:	5801 PELICAN BAY BOULEVARD			
(Principal office address MUST BE A STREET ADDRESS)	SUITE 300	ALLE S TI		
	NAPLES, FL 34108			
Enter new mailing address, if applicable:		D PH D		
(Mailing address MAY BE A POST OFFICE BOX)		FL E		

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ado	dress
	, City	Florida 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 mv 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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	PHILIP COWLEY	4401 N FAIRFAX DR	
		SUITE 800	
		ARLINGTON, VA 22203	□Change
MGR	MEGAN MELONCELLI	5801 PELICAN BAY BLVD	Add
		SUITE 300	🗆 Remove
		NAPLES, FL 34108	□Change
MGR	MANAGEMENT SERVICES GROUP LLC	4401 N FAIRFAX DRIVE	🗆 Add
		SUITE 700	Remove
		ARLINGTON, VA 22203	□Change
AR	DAVID BRODY	4401 N FAIRFAX DR	≣ Add
		SUITE 800	🗆 Remove
		ARLINGTON, VA 22203	□Change
	·		🗆 Add
			🗆 Remove
			□Change
			🗆 Add
		<u> </u>	🗆 Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: ______(optional) (If an effective 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 (3)(b)

(If an effective 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 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

DECEMBER 20	2024	
M	n	
	ignature of a member or authorized representative of a me	ember
DAVID BRODY, AUTH	ORIZED REPRESENTATIVE	
	Typed or printed name of signee	· · · · · · · · · · · · · · · · · · ·