L23000535094

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COVER LETTER

TO: Registration So Division of Cor					
	k Investment, LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
	ondence concerning this matter	-			
	Robert E Mitchell				
	•	Name of Person			
	Mitchell & Associates, PL	LC			
		Firm/Company			
	P.O. Box 255				
		Address			
	Henderson, KY 42419				
		City/State and Zip Code			
	rmitchell@mitchell-associa				
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	ification)		
Robert E. Mitchell		270 827-5828			
Name o	of Person	Area Code Daytin	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 Addre Registration		Street Address: Registration Se	ection		
Division of C		-	Registration Section Division of Corporations		
P.O. Box 632		The Centre of			
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

30EC 27 PM.D. (Piney Creek Investment, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on December 1, 2023 Florida document number ______L23000535097 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Piney Creek Investments, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 address

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 Changing Registered Agent, Signature of New Registered Agent

. Florida

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
			□Add
			□Remove
			□ Change
			□Add
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ctive date, if other than the effective date is listed, the date mu	e date of filing: st be specific and cannol lock does not meet the	t be prior to date	of filing or more the	optional on 90 days after filin) g.) Pursuant to 605.07 e will not be listed
ument's effective date on the D	epartment of State's	records.		,	
cord specifies a delayed effective filed.	ve date, but not an ef	fective time, at	12:01 a.m. on the	carlier of: (b)	The 90th day after t
December 20		23			
1.1	/2				
_ the the	Signature of a member				

Filing Fee: \$25.00