124000217257

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Namo	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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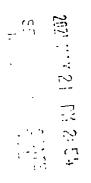
Office Use Only



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COVER LETTER

Registration Section

TO:

Division of Co	rporations		
6949 Pitts	Road LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jennifer Waxer		
		Name of Person	
	6949 PITTS ROAD LLC		
		Firm/Company	
	5930 Camp Trail		
		Address	
	Cumming, GA 30040		•
		City/State and Zip Code	
	li ssail addes as 7	to be used for future annual report notification	arion)
For further information	eoncerning this matter, please c		auou)
	concerning this matter, prease c		
Jennifer Waxer		404 606-6934 at ()	·
Name (of Person	Area Code Daytime T	elephone Number
Enclosed is a check for t	the 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 Division of O P.O. Box 63. Tallahassec,	Section Corporations 27	Street Address: Registration Secti Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 3	fon 50 morations 60 morations 6

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

6949 PITTS ROAD LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited	inv as it now appears on our records Liability Company)	<u>.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L24000217257	were filed on <u>05/09/2024</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
1.55 Teginored Willes Tadrem.	Enter Florida street address	
	, Flo	rida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		0 (2)
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F	d I am familiar with and F.S. Or, if this document is
		5 F.S.

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
MGR	Dwayneq Waxer	5930 Camp Trail	[] Add
		5930 Camp Trail Cumming CA 30040	■Remove
			□Change
MGR	Dwayne Waxer	5936 Camp Tail Curring GA 30046	■ Add
		Curring GA 30046	□Remove
			□ Change
			🗆 Add
			LI Remove
			□Change
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			□ Change
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		<u> </u>	Remove
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			□Remove
			☐ Change

Correcting typo in name			
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ctive date, if other than t	the date of filing:		tional)
	must be specific and cannot be prior to d s block does not meet the applicable		
	e Department of State's records.	- · · · · · · · · · · · · · · · · · · ·	
	ctive date, but not an effective time,	, at 12:01 a.m. on the earlier of: (
filed.			200
	2024		2.1
Mov 17	2024		-:
d May 17		•	160
d <u>May 17</u>	•)	<u></u>
d May 17		ed representative of a member	<u>N</u>
d May 17	Signature of a member or authorize	ed representative of a member	

Typed or printed name of signee