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## **COVER LETTER**

Tallahassee, FL 32314

	tion Secti of Corpo							
	iC LLC							
SUBJECT:		Name of Lim	ited Liability Company			_		
The enclosed Arti	cles of Ar	nendment and fec(s) are sub	mitted for filing.					
Please return all c	orrespond	ence concerning this matter	to the following:					
		Blaine C. Dickenson, Esq.						
			Name of Person					
		Dickenson Law, P.A.						
			Firm/Company			<del></del>		
		4800 N. Federal Hwy., #E	-100					
			Address	· · · · · · · · · · · · · · · · · · ·		<del></del>		
		Boca Raton, FL 33431						
		bcd@dmrslaw.com	City/State and Zip C	ode				
		E-mail address: (	to be used for future ani	nual report notific	ration)	- (0	2	
For further inform	ation con	cerning this matter, please ca	all:			ECR	2024 SEP 1	*****
Blaine C. Dickens	son, Esq.		561 at ()	3911900		LAK	01 d.	7, 37% 10 TO
	Name of P	erson	Area Code	Daytime	Telephone Num	bers OF S	_ 一番二:	
Enclosed is a chec	k for the	following amount:					55	
<b>■</b> \$25.00 Filing	Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing I Certified Copy (additional copy i	Y	Certifi	Filing Ficate of Sied Copy	<sup>F</sup> ee. Status &	
<u>Mailing</u> Registra	Address: ation Sec	ction		t Address: istration Sect	ion			
Divisio	n of Cor	porations	Divi	sion of Corp	orations			
P.O. Bo	ox 6327		The	Centre of Ta	llahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SDGC LLC		
( <u>Name of the Limited Liability (</u> A Florida Li	Company as it now appears on our records.) imited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Con Florida document number <u>L24000256902</u>	npany were filed on06/05/2024	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE.	SS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SECRETARY O
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	aZip 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>	Address	Type of Action
MGR	SDGC Management Partners, LLC	900 E ATLANTIC AVE SUITE 5	
		DELRAY BEACH, FL 33483	■Remove
			□ Change
MGR	SDG Management Partners LLC	900 E ATLANTIC AVE SUITE 5	<b>\B</b> Add
		DELRAY BEACH, FL 33483	Remove
			☐ Change
			SECRITAS TALLAH
			HARRY DChange
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove

is filed.							<del></del>
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