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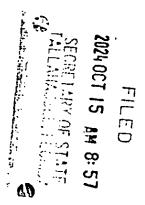
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COVER LETTER

TO:

TO: Registration Division of C	n Section Corporations		
SDGC I	LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Blaine C. Dickenson, Esq		
	 	Name of Person	
	Dickenson Law, P.A.		
		Firm/Company	
	4800 N. Federal Highway	, #E-100	
		Address	<u></u>
	Boca Raton, FL 33431		
		City/State and Zip Code	 _
	E-mail address:	to be used for future annual report noti	fication)
for further informatio	on concerning this matter, please c	all:	
Blaine C. Dickenson,	Esq.	561 391-1900 at()	
Nan	ne of Person	Area Code Daytim	e Telephone Number
Enclosed is a check fo	or the following amount:		
☐ \$25.00 Filing Fee	\$\ \equiv \qq \qua	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Add</u> Registratio		Street Address: Registration Sec	ction
Division of Corporations		Division of Corporations	
P.O. Box 6 Tallahasse	5327 e, FL 32314	The Centre of T 2415 N. Monro	'allahassee e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

iny as it now appears on our records.) Liability Company)		
were filed on 06/05/2024 and assigned		
ility company here:		
lity Company," the designation "LLC" or the abbreviation "L.L.C."		
220 Congress Park Dr. Suite 144		
Delray Beach, FL 33445		
ECRETARY OF		
address on our records, enter the name of the new regis		
Fotor Florida years address		
Enter Florida street address		
, Florida		

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			DAdd
			□Remove
			□Change
<u> </u>			□ Add
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		-	
ective date, if other than the	date of filing:	1. 657	_ (optional)
te: If the date inserted in this b	lock does not meet the applicab	le statutory filing requirem	days after filing.) Pursuant to 605.020 ents, this date will not be listed a
ument's effective date on the I	epartment of State's records.		
cord specifies a delayed effecti	ve date, but not an effective time	e at 12:01 a.m. on the earl	ier of: (b) The 90th day after the
s filed.	e date, our not an encoure time	, at 12.01 u.m. on the carr	er or. (b) The 70th day after the
Octobor 11	2024		
October 11 ed	/// .		
	111	ney and awnwell	danad
	Signature of a member or authorize	zed a presentative of a member	r depend
Blaine C. Dickenson, I			-
	* \$ c##		