

(shown below) on the top and bottom of all pages of the document.

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To:	Division of Corporations	
	Division of Corporations	So -<
	Fax Number : (850)617-6383	SES R
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From		
_ S	Account Name : COMPUTERSHARE	~ ညည
ಎ ಜಿಲ್ಲೆ	Account Number : 110432003053	m —
IZ: SAE ORI	Phone : (561)694-8107	
\www.g	Fax Number : (561)214-8442	
- <u>E. H.</u>		
**Enter the	email address for this business entity to be us	sed for future
	report mailings. Enter only one email address	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PINEYWOODS FROSTY AIR LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

M. SOLOMON SEP 1 1 2024

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

#### SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	rs on the records of the Florida	Department of	
State: Pineywoods Frosty Air LLC			
Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, it applicable: (Mailing address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited lie		00005531	724 SEP 11
3. Jurisdiction of its organization: Delaw.		<u> </u>	
4. Date authorized to do business in Florida:	06/22/2020	<u>_</u>	न्य <b>ऋ</b> <del>४ं</del> №
SECTION II (5-9 complete only the applicable	changes)	لـــ ين	∑ <b>ω</b>
5. New name of the limited liability company: (mus	Pineywoods BK LLC st contain "Limited Liability C	ompany, " "L.L.C.," or	"LLC ")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or marmust contain "Limited Liability Company," "L.L.	naging members adopting the		
6. If amending the registered agent and/or register registered agent and/or the new registered office a	ed officer address on our recorddress here:	ds, enter the name of the	e new
Name of New Registered Agent:			
New Registered Office Address:	Enter Flor	ida Street Address	
<del></del> -	Ciņ	, Florida Zip Co	xle
New Registered Agent's Signature, it changing R. I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regis document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this cap and complete performance of tered agent as provided for in in the registered office addres	acity. I further agree to o my duties, and I am fan Chapter 605, F.S. Or, if	comply with tiliar with this

<u>Name</u>	Address Typ	pe of Action
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Filing Fee: \$25.00

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "PINEYWOODS FROSTY AIR LLC", CHANGING ITS NAME FROM "PINEYWOODS FROSTY AIR LLC" TO "PINEYWOODS BK LLC", FILED IN THIS OFFICE ON THE NINTH DAY OF SEPTEMBER, A.D. 2024, AT 3:55 O'CLOCK P.M.



Authentication: 204347860

Date: 09-09-24

## STATE OF DELAWARE CERTIFICATE OF AMENDMENT

Name of Limite	d Liability Company:	Pineywoods Frosty Air LLC
The Certificate as follows:	of Formation of the lim	nited liability company is hereby as
The name of t	he Limited Liability C	company is:
Pineywoods B	KLLC	
IN WITNESS V	VHEREOF, the under	signed have executed this Certifica
he 9th	day of Septe	ember, A.D. 2024
	Bv:	/s/ Caitlin Lazarus
	Ву:_	/s/ Caitlin Lazarus  Authorized Person(s)
	By:_ Nar	Authorized Person(s)