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COVER LETTER

TO:	Registration Division of C			
SUBJE	(1711)	ERBALS, LLC		
COORE	· · ·	Name of Li	mited Liability Company	
The enct	osed Articles o	of Amendment and fee(s) are su	bmitted for filing.	
		nondence concerning this matte	_	
		K. Paul MacArthur		
			Name of Person	
		MacArthur, Heder & Met	ler, PLLC	
			Firm/Company	 _
		4844 North 300 West, Sui	ite 300	
			Address	
		Provo, Utah 84604		
			City/State and Zip Code	
		paul@mhmlawoffices.com		
For furthe	er information	concerning this matter, please c	to be used for future annual report no	tification)
	IacArthur	o since the manner, preside to		
TX. I dtti ty			801 377-1900 at ()	
	Name	of Person	Area Code Daytir	ne Telephone Number
Enclosed	is a check for t	he following amount:		
\$25.0	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
F E P	Agiling Address Registration : Division of C 2.O. Box 632 Tallahassee, 1	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee se Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN 14 AM 11: 30

COLEMERNALS, LLC			355A	
(Name of the Lir	nited Liability Compa (A Florida Limited)	ny as it now appears on o Liability Company)	ur recordia LAHASSEE. FL	. Ł
The Articles of Organization for this Limited	Liability Company			
Florida document number L22000201718			and assig	,nea
This amendment is submitted to amend the fo				
x. If amending name, enter the new name	of the limited liah	ility company here:		
he new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designat	ion "LLC" or the abbreviation "L.L.s	C."
inter new principal offices address, if appl				
Principal office address MUST BE A STRE	ET ADDRESS)		<u> </u>	
inter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE	<u> </u>			
The state of the s				
. If amending the registered agent and/or gent and/or the new registered office addro	registered office a ess here:	ddress on our records	, enter the name of the new r	egister
Name of New Registered Agent:	Linda Langenba	cher-Bellezza		
New Registered Office Address:				
		Enter Florida stre	et address	
			, Florida	
		City	Zip 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.

Linda langerbacher-Bellezza

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	Linda Langenbacher-Bellezza	414 Magnolia Drive	
		Clearwater, FL 33756	
		<u>.</u>	■ Change
MGR	Alfred Bellezza	414 Magnolia Drive	□Add
		Clearwater, FL 33756	□Rcmove
			■ Change
		-	□Add
			□Remove
		Change	
			
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`an effective (ote: If the	fate is fisted, the date inserted in	date must be sp	ecitic and car	mot be prior to	o date of fil	ing or more tha	n 90 days after	onar) filing.) Purs	uant to 605.6	0207
ocument's	date inserted in effective date o	n the Departn	ient of State	cine applicate's records.	oie statuto	ry filing requ	irements, this	s date will:	not be liste	d as
record spec	ifies a delayed	effective date.	but not an	effective tim	ne, at 12:0	I a.m. on the	earlier of: (b) The 90s	h day after	the
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