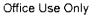
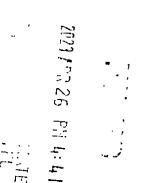
L22000262948

(Requestor's Name)
(inequestors Maine)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consideration to Filips Officer
Special Instructions to Filing Officer:





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COVER LETTER

TO:

Registration Section
Division of Corporations

SID IFCT.	MAY FL	OWERS, LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Joseph L. Lindsay, Esq.			
Name of Person				
		Lindsay & Allen, PLLC		
Firm/Company				
	13	180 Livingston Road, Suite 206		
Address		,		
Naples, Florida 34109, USA		i i		
		City/State and Zip Code		t.
		joe@naples.law		_
	E-mail address: (to be used for future annual report noti	fication)	=
For further information co	ncerning this matter, please ca	all:		
Joseph L.	Lindsay, Esq.	239 593-7900 at ()		
Name of	Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for the	following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Se Division of Cor The Centre of T	porations	0

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAY FLOWERS, LL	С		
(Name of the Limited Liability Company as it (A Florida Limited Liability	t now appears on our records.) y Company)		
The Articles of Organization for this Limited Liability Company were	filed on June 8, 2022	and assigned	
Florida document number L22000262948			
This amendment is submitted to amend the following:		67	
A. If amending name, enter the new name of the limited liability co	ompany here:		
The new name must be distinguishable and contain the words "Limited Liability Cor	npany," the designation "LLC" or th	ne abbreviation "L.E.C."	
Enter new principal offices address, if applicable: 25508 Creekside Cov		ove	
(Principal office address MUST BE A STREET ADDRESS)	Boerne, Texas 7800	6	
Enter new mailing address, if applicable:	25508 Creekside	Cove	
(Mailing address MAY BE A POST OFFICE BOX)	Boerne, Texas 78006		
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	ss on our records, enter the r	name of the new regist	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
\overline{C}	ity, 1 101 101	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.

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
	<u></u>		□Add
			□Remove
			Change
			□Remove
			□ Change
			□ Add
			Remove
			□ Change
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Mective date, if other than	the date of filing: (option must be specific and cannot be prior to date of filing or more than 90 days after f	nal)	
Note: If the date inserted in thi	must be specific and cannot be prior to date of filing or more than 90 days after fis block does not meet the applicable statutory filing requirements, this is Department of State's records.	iling.) Pursuant t date will not b	o 605.0207 e listed as t
record specifies a delayed effe d is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day	after the
4/10/			<u> </u>
Dated 4/19/23			-1
	Chu D		
	Signature of a member or authorized representative of a member		- 67
	Chase J. May		<u> </u>
	Typed or printed name of signee		

Filing Fee: \$25.00