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COVER LETTER

TO:

Registration Section Division of Corporations

The Twenty-Second Street Group, L.L.C. SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jeffery M. Wolf Name of Person Firm/Company 335 14th Avenue NE Address St. Petersburg, FL 33701 City/State and Zip Code jwolf@jmwolf.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 637-8950 Jeffery Wolf Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: **Street Address:** Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Twenty-Second Street Group.		
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited I Florida document number L04000040248	Liability Company were filed on _	05/27/2004 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STREA	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		24 MAY 21 M
B. If amending the registered agent and/or agent and/or the new registered office addre	•	records, enter the name of the new register
Name of New Registered Agent:	Mary E. Gray	
New Registered Office Address:	2724 22nd Street North	
,	Enter F	lorida street address
	Saint Petersburg	, Florida 33713
	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.

H Changing Registered Agent Signature of Yew 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
MGRM	Ann L. Wolf	335 14th Avenue NE	□ Add
		St. Petersburg, FL 33701	■Remove
			☐ Change
MGR	Jeffery M. Wolf	335 14th Avenue NE	■Add
		St. Petersburg, FL 33701	□Remove
			□ Change
AMBR	Mary E. Gray	335 14th Avenue NE	≘ Add
		St. Petersburg, FL 33701	□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			Change.

	<u> </u>
ffective	date, if other than the date of filing: (optional)
`an effecti <u>Vote:</u> If t	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a seffective date on the Department of State's records.
l is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	5-13-2024 Am 11/109
	Signature of a number or authorized representative of a member
	JEFFERY M. WOLF Typed or printed name of signee
	U NEFFERY M. WOLF