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COVER LETTER

TO:

Tallahassee, FL 32314

SUBJECT: Myricks + Sons Foundations LLC 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: Clayton Myrick Name of Person				Registration Sec Division of Corp	TO:
	<u>LC</u>	Foundations mited Liability Company	Name of L	ле'ст: [′] Му	, SUBJE
		abmitted for filing.	nendment and fee(s) are s	enclosed Articles of A	The en
Clayton Myrick Name of Person		er to the following:	ence concerning this matt	e return all correspon	Please
	·	n Myrick Name of Person	Clayto		
Myricks + Sons Foundations LLC Firm/Company	ions LLC	+ Sons Founda	myricks		
2720 Wilde Lake Blvd Address	'vd	Wilde Lake K Address	2720		
Pensacola FL 32526 City/State and Zip Code borntragerchristine @ 9 mail. Com E-mail address: (to be used for future amount report notification)		2/a FL 32526 City/State and Zip Code	Pensac		
E-mail address: (to be used for future amount report notification)	ort notification)	Christine @ SM	borntrager E-mail address		
For further information concerning this matter, please call:		call:	cerning this matter, please	urther information co	For fur
Christine Bornfrager at (850) 255-3661 Name of Person Area Code Daytime Telephone Number	55 - Recol Daytime Telephone Number	at (<u>850</u>) Area Code	orntrager erson	Christine A	(
Enclosed is a check for the following amount:			following amount:	osed is a check for the	Enclos
(additional copy is enclosed) Certified Copy	Certificate of Status &	Certified Copy	-	325.00 Filing Fee	□ \$2
Mailing Address: Registration Section Street Address: Registration Section			ction		
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee	of Corporations	Division		Division of Co	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



August 8, 2023

CLAYTON MYRICK 2720 WILDE LAKE BOULEVARD PENSACOLA, FL 32526

SUBJECT: MYRICKS & SONS FOUNDATIONS LLC

Ref. Number: L05000003382

We have received your document for MYRICKS & SONS FOUNDATIONS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The complete document was not received.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

SEP 0 5 2023

Letter Number: 523A00017949

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Myricks of Son (Name of the Limited)	S Foundations LLC 2023 SEP -5 Pil 12: 47 d Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia	bility Company were filed on $1/12/2005$ and assigned
Florida document number <u>L050000</u>	
This amendment is submitted to amend the follow	wing:
A. If amending name, enter the new name of	the limited liability company here:
Enter new principal offices address, if applica	
(Principal office address MUST BE A STREET	*ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>
B. If amending the registered agent and/or re agent and/or the new registered office address	
Name of New Registered Agent:	Clayton Myrick
New Registered Office Address:	2720 Wilde Lake Blvd Enter Florida street address
	Pensacola , Florida 32526 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.

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
			□Remove
			□Change
			□ Add
			□Remove
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e ees	the day of sale and the day of filters
(If an ef <u>Note:</u>	ive date, if other than the date of filing:
f the reco record is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	8/28/2023
	Ny Signature of a member or authorized representative of a member
	Willie Myrick Typed or printed name of signee