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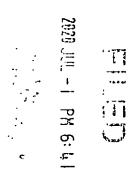
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AUG 13 2020 S. YOUNG

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	otography, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
	ondence concerning this matter		
	Curtiss Bryant		
		Name of Person	
		Firm/Company	
	7655 W Gulf to Lake Hwy		
		Address	
	Crystal River FL 34429		
	email@bryants-photography		
For further information c	E-mail address: (concerning this matter, please co	to be used for future annual report not all:	ification)
Curiss Bryant		352 397-2787	
Name c	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection
Division of C P.O. Box 632	Corporations	Division of Co The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bryants Photography, LLC		2020
(Name of the Limited Liability	Company as it now appears on our records Limited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number <u>L07000029256</u>		and assigned
This amendment is submitted to amend the following:		<u>.</u>
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LEC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		_
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	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>	Name	Address	Type of Action
MGR	Curtiss Bryant Jr		
			□Remove
			Change
			□Add
			□ Remove
			□Change
			□Add
		<u> </u>	□Remove
			□Change
			☐Add
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			Chann

— Add	ng "Jr" to MGR Curtiss Bryant's name
	
-	
T.,_4!	6/25/2020
n effective	ate, if other than the date of filing:
<u>ste:</u> If th	edate inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed
cument s	effective date on the Department of State's records.
ecord spe	cities a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
ited	June 25 20
	JUNE 25 10 Glad
_	
_	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00