L0900002623

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FOUNTAIN, SCHULTZ & BRIDGFORD, PLLC

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COVER LETTER

	n of Corp					
SUBJECT:	untain, Scl	nultz & Bridgford, P.L.L.C.				
		Name of Lin	nited Liability Compan	у		
The enclosed Ar	ticles of A	mendment and fee(s) are sub	omitted for filing.			
Please return all	correspon	dence concerning this matter	to the following:			
		Scott C. Bridgford				
			Name of Person	n		
		Fountain, Schultz & Bridg	ford, P.L.L.C.			
			Firm/Company	,	 	
		2045 Fountain Professions	al Court, Suite A			
			Address			
		Navarre, FL 32566				
		<u> </u>	City/State and Zip (Code		
		fountain@fountainlaw.com				
For further inform	nation con	E-mail address: (cerning this matter, please c	to be used for future an	unual report notific	cation)	
Scott C. Bridgfor	rd		850	939-3535		
	Name of F	erson	at (Area Code	Daytime	Telephone Number	
Enclosed is a che	ck for the	following amount:				
≅ \$25,00 Filing	g Fee	S30.00 Filing Fee & Certificate of Status	Certified Cop (additional copy	y	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	
	Address: ration Se	ction		et Address:	ion	
Divisio	on of Cor	porations		Registration Section Division of Corporations		
	ox 6327	22214	The	Centre of Tal	llahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

rountain, Schultz & Bridglord, P.L.L.C.			
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records.) Ed Liability Company)		
The Articles of Organization for this Limited Liability Compa Florida document number L09000002623	and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
Fountain & Bridgford, P.L.L.C.			
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" o	r the abbieviation L.L.C."	
Enter new principal offices address, if applicable:		TO E TO	
(Principal office address MUST BE A STREET ADDRESS)			
		RY OF STANSEE.	
Enter new mailing address, if applicable:		E. F.	
(Mailing address MAY BE A POST OFFICE BOX)		THE W	
		y:	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the</u>	e name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street uddress		
	, Floric	da	
	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

1034

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

Title	Name	Address	Type of Action
AMBR	Kerry Anne Schultz, P.L.	2045 Fountain Professional Ct, Suite A	□Add
		Navarre, FL 32566	≅Remove
			□Change
			□Add
			□ Rепюче
			□Change
			🗆 Add
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	T. J. 2020			
(If an ef	ive date, if other than the date of filing: July 1, 2020 (optional fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable continue of the provided in this block does not meet the applicable continue of the provided in this block does not meet the applicable continue of the provided in this block does not meet the applicable continue of the provided in this block does not meet the applicable continue of the provided in this block does not meet the applicable continue of the provided in this block does not meet the provided in th		r in 605 (0207 (3) <i>(</i> L)
	If the date inserted in this block does not meet the applicable statutory filing requirements, this dateent's effective date on the Department of State's records.	c will not	be liste	d as the
164				
record is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) T led.	he 90th da	ıy after	the
			مستمير	
Dated	57 99 10 21 0 30 177		_	
Dated				
Dated	Wall ()	5_		
Dated	Signature of a member or authorized representative of a member And Scott Bridg God King	5_	_ / //	14.

Filing Fee: \$25.00