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(Re	equestor's Name)	.
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
☐ SICK-NS	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	J. T. Royer Name of Lim	Associates L	LC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	J. T.	Name of Person Royer & Associal Firm/Company 6 Oldham Way Address	des, LLC
		Brach Gardens F City/State and Zip Code cy 3 and com to be used for future annual report notifi	
For further information c	oncerning this matter, please c	all:	
Jeffrey Name o	T. Royer	at (<u>414</u>) 350 - Area Code Daytime	-1265 e Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	S30.00 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)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

J. T. Royer is A. (Name of the Limited Liability Compared L.) (A Florida Limited L.)	Associates LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I.	ny as it now appears on our records.) hability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on Nov. 14, 2011 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
N/A	
The new name must be distinguishable and contain the words "Limited Liabili	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	8826 Oldham Way Palm Beach Gardens, FL 33412
Trincipal office datess most interactions	33412
Enter new mailing address, if applicable:	8826 Oldham Wry Palm Bench Gardens FL 33412
(Mailing address MAY BE A POST OFFICE BOX)	Palm Bench Gardens FL 33412
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: Jef	Grey T. Royer 6 Oldham Way Enter Florida street address
New Registered Office Address: 882	Enter Florida street address
Palm B	city Specific Reproduction State City Sip 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			Remove
			□Change
			□Add
			Remove
		/	□Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

		
		
Effective date.	, if other than the date of filing: (optional)	
f an effective date	e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 ite inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	
	ective date on the Department of State's records.	
1	1.1. 1. 60 of the transfer of the state of t	h.,.
e record specified ed is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	iic
<	e/a/2004	
Dated	8/8/2024	
	Signature of a member or authorized representative of a member	