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## **COVER LETTER**

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SUBJEC		Bruce and S	Son LLC	•	•
SUBJEC	- <b>1</b> · .		ited Liability Company		
The enclo	osed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn	all correspo	ndence concerning this matter	to the following:	
			Bruce Carter Sr		
			· · · · · · · · · · · · · · · · · · ·	Name of Person	
			Bruce and Sons LLC		
				Firm/Company	
			915 San Lanta Cir		
				Address	
			Sanford, FL 32771		
			<del> </del>	City/State and Zip Code	
			cdbrinson@outlook.com		
		<u> </u>		to be used for future annual report notification)	
For furthe	er in	formation co	oncerning this matter, please ea	111:	
Bruce CA	Arter	Sr		407 235-4609 at ()	
		Name of	f Person	Area Code Daytime Telephone Number	
Enclosed	is a	check for th	ne following amount:		
<b>≡</b> \$25.0	00 Fi	iling Fec	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee.  Certified Copy Certificate of Sta  (additional copy is enclosed) Certified Copy  (additional copy is enclosed)	tus &
I I I	Reg Divi P.O	ing Addressistration Sision of C. Box 632 ahassec, F	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	10 AM 8: 28

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bruce and Sons LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/02/2024 and assigned Florida document number <u>L13000050798</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida City 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. Orifithis in cument 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 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
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