L14000051418

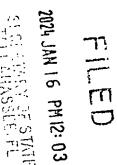
(Vu)
(Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:
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COVER LETTER

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	Registration S Division of Co			
CHD IE		e Drafting LLC		
SUBJEC	-1:	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspond	ondence concerning this matter	to the following:	
		Melaney Lyons		
			Name of Person	
			Firm/Company	
		140 Prairie Falcon Way		
		-	Address	
		Leander, Texas 78641		
			City/State and Zip Code	
		laneynlyons@gmail.com		
For furth	er information o	E-mail address: (concerning this matter, please c	to be used for future annual report of	otification)
Melaney			813 841-5705	
	Name (of Person	at () Area Code Dayt	ime Telephone Number
Enclosed	l 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)
	Mailing Addre		Street Address: Registration S	lection
Registration Section Division of Corporations		Division of C		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of	Tallahassee	
		2415 N. Moni	roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BACK OFFICE DRAFTING, 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 $\frac{3/28/2014}{1}$ and assigned Florida document number L14000051418 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Laney Lyons, LLC 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) 140 Prairie Falcon Way Enter new mailing address, if applicable: Leander, Texas 78641 (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

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.

Cirv

, Florida _

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Add
		 	□Remove
			Change
			□Remove
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			□Remove
			□Change

					
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Affective date, if other than the an effective date is listed, the date may be a listed in this becoment's effective date on the I	e date of filing: ist be specific and cannot lock does not meet the	applicable statutory i	(option or more than 90 days after filing requirements, this	filing.) Pursuant to 605.02	:07 (as t
record specifies a delayed effecti I is filed.	ve date, but not an effe	ctive time, at 12:01 a	m. on the earlier of: (b)	The 90th day after th	1e
12/30 Pated	2023				
	Signature of a member	or authorized representa	itive of a member		
		- r	-		
Melaney Lyons					

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Filing Fee: \$25.00