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COVER LETTER

TO: Registration Division of C	Section Corporations					
SCOTT SUBJECT:	AND FENDERSON PLLC					
3000ECT	Name of Lim	ited Liability Company				
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.				
Please return all corres	spondence concerning this matter	to the following:				
	CHARLES D SCOTT	CHARLES D SCOTT				
	Name of Person					
	THE LAW OFFICES OF CHARLES D SCOTT PLLC					
		Firm/Company				
	1135 PASADENA AVE S	.#104				
		Address				
	SOUTH PASADENA, FL	33707				
		City/State and Zip Code				
	ITSLEGAL@AOL.COM E-mail address: (to be used for future annual report notific	cation)			
For further information	n concerning this matter, please ca	all:				
CHARLES D SCOTT		727 445-0439				
Nam	e of Person	at ()	Telephone Number			
Enclosed is a check fo	r the following amount:					
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Add Registratio		Street Address: Registration Sect				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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 OF

SCOTT AND FENERSON PLLC (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 ____ Florida document number 1.14000096261 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NOT AMENDING NAME The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1135 PASADENA AVE S, #104 SOUTH PASADANA FL331 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1135 PASADENA AVE S, #104 SOUTH PM 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 agent and/or the new registered office address here: NOT AMENDING REGISTERED AGENT NAME Name of New Registered Agent: 1135 PASADENA AVE S, #104 New Registered Office Address: Enter Florida street address SOUTH PASADENA . Florida ³³⁷⁰⁷

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 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
AMBR	KATHRYN FENDERSON SCOTT	4755 CENTRAL AVE, ST. PETERSBURG FL 337	—
			■Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗖 Add
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			□ Change

			
			
			
			
Affective date, if other than the c	10/1/2022		(ontional)
an effective date is listed, the date must	be specific and cannot be prior ek does not meet the applica	able statutory filing requiren	(optional) days after filing.) Pursuant to 605.0207 (; nents, this date will not be listed as the
record specifies a delayed effective d is filed.	date, but not an effective tin	me, at 12:01 a.m. on the earl	ier of: (b) The 90th day after the
	2022		
OCTOBER 1	2022		
OCTOBER 1	2022 	21	

Filing Fee: \$25.00