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(Re	questor's Name)	_
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(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE TALL AHASSEE, FLORIDA

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COVER LETTER

	stration Sec ion of Corp			
SUBJECT: _	Southern Go	urmet, LLC		
		Name of Lim	ited Liability Company	
•				
The enclosed a	Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return a	dl correspon	dence concerning this matter	to the following:	
		Michael Fayard		
			Name of Person	
		Fayard Law, PLLC		
			Firm/Company	
		2170 Main St., Ste. 204		
			Address	
		Sarasota, Florida 34237		
		michael@fayard-law.com	City/State and Zip Code	
		E-mail address; (to be used for future annual report no	otification)
For further info	ormation cor	neerning this matter, please ea	all:	
Michael Fayar	-d		941 306-1310	
	Name of l	Person	at () Area Code Dayti	me Telephone Number
Enclosed is a c	heck for the	following amount:		
ප් \$ 25,00 Fili	ing 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 ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Plorida document number 1.14000177987	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lial</u>	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	Will be a subsequent	
ne new name must be distinguishable and contain the words. Limited Liab		abbreviation "L.L.C.
Enter new principal offices address, if applicable:	201 W Main Street	
Principal office address MUST BE A STREET ADDRESS)	Leesburg, FL 34748	
		; in a contract to the contrac
Enter new mailing address, if applicable:	201 W Main Street	· =
Mailing address MAY BE A POST OFFICE BOX)	Leesburg, FL 34748	
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	<u> </u>	THE HAIRE OF THE RE
	<u> </u>	8
registered agent and/or the new registered office address her	LLC	A LLA
Name of New Registered Agent: Payard Law,	LLC	TALLAHA
Name of New Registered Agent: Payard Law,	Etter Florida street address	SSE LA HASSE
Name of New Registered Agent: New Registered Office Address: Payard Law, Pay	Enter Florida street address	TALLAHAS
Name of New Registered Agent: New Registered Office Address: Payard Law, Pay	Ett.C Enter Florida street address City City	TÄLLAHAS 18 MAR 1

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Brad Miller	201 W Main Street	= Add
	·	Leesburg, FL 34748	П.р
MGR	Bryce Woodyard	201 W Main Street	
		1.eesburg, F1, 34748	a Add
			Remove
			Change
Ambr	Ambr James Maddox	1612 Loves Point Dr.	
		Leesburg, F1, 34748	■ Remove
			Change
Ambr	Sandra Maddox	1612 Loves Point Dr.	
		Leesburg, FL 34748	■ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			□ Remove
			□ Change

	y of the second			
. If amer	nding any other informat	on, enter change(s) here: (A	attach additional sheets, if necesso	ury.)
				
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Note: 1 document	f the date inserted in this blo nt's effective date on the Dep	k does not meet the applicable s artment of State's records. effective date, but not an	(optional confiling or more than 90 days after filling statutory filling requirements, this day effective time, at 12:01 a.m.	te will not be listed as the
	Jarch 12	2018		
Dated _		 :		_ _
		gnature of a member or authorized	representative of a member	——— 2 5
	Michael Fayard, Esquire			MAR IV
		Typed or printed nan	ne of signee	
				ANC: 02
		Page 3 of	'3	92
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Filing Fee: \$25.00