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COVER LETTER

	egistration Sec ivision of Corp					
SHD IECT	Cameron &	Company of Northwest Floric	da, LLC			
Name of Limited Liability Company						
The enclos	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please retu	rn all correspor	ndence concerning this matter	to the following:			
		Brad Congleton				
			Name of Person			
		Brad Congleton CPA, Inc.				
Firm/Company						
		2050 W. County Hwy. 30/	A, Suite 214			
			Address			
		Santa Rosa Beach, FL 324	159			
			City/State and Zip Code			
		erika@cpaon30a.com				
		E-mail address: (to be used for future annual report notifi	cation)		
For further	information co	ncerning this matter, please ca	all:			
Brad Cong			850 622-2280 at ()			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is	s a check for the	e 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 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

Cameron & Company of Northwest Florida, 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 July 14, 2015 and assigned Florida document number L15000120715 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 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. 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action			
MGR	James Cameron	419 Paradise Blvd.				
		Panama City Beach, FL 32413	Remove			
			Change			
MGR	Jason Cameron	419 Paradise Blvd.	■ Add			
		Panama City Beach, FL 32413	□ Remove			
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Filing Fee: \$25.00