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J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HARPER / RYAN HOMES "LLC" Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
C. TODD BASS, ESQ (FLA BAR 0932701) Name of Person
LAW OFFICE OF MICHAEL J GUJU, ESQ.
31564 US HWY 19 N Address
PALM HARBOR, FL 34684 City/State and Zip Code
City/State and Zip Code SCOTTHARPER 1211@ YA HOO.COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
C. Todd BASS, ESQ. at (727) 526-3529 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\text{Certificate of Status}\$ Certified Copy (additional copy is enclosed) \$\text{Copy}(\text{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

HARPER 1	RYAN A		"LLC"		
' (<u>Name of the Limited</u> (A	Liability Company as Florida Limited Liabil	it now appear ity Company)	s on our records.)		
The Articles of Organization for this Limited Liab Florida document number <u>L1500021128</u>		e filed on	12/21/20	215 and assigned	
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of the	ne limited liability	company he	ere:		
The new name must be distinguishable and contain the word	ds "Limited Liability C	ompany," the d	esignation "LLC" or	the abbreviation "L.L.C."	-
Enter new principal offices address, if applicab	le:				_
(Principal office address MUST BE A STREET.	ADDRESS)				_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO				16 MAY -2 AM 7: SECAR PAN OF STALLAR, SSS.E. FLO	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office ce address here:	address on	our records, <u>e</u>	enter the name of the	new
Name of New Registered Agent:					
New Registered Office Address:					_
		Enter Flor	rida street address		
		Cin	, Florid	laZiv Code	_
		City [,]		Zip Code	

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	SCOTT A. HARPER, SR	225 49 AVE N	DX: Add
		ST PETERSBURG, FL 3370	<u>3</u> □ Remove
			□ Change
MBR	SCOTT A. HARPER, JR	225 49 AVE N.	⊠ Add
		ST PETERS BURG, FL 3307	□ Remove
			Change
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