L16000022181

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COVER LETTER

TO:

Registration Section Division of Corporations

MAWHAROLD ENTERPRISES, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: Keith E. Crockett, Esq. Name of Person Crockett Law P.L. Firm/Company 10033 Sawgrass Drive West, Suite 125 Address Ponte Vedra Beach, FL 32082 City/State and Zip Code keith@crockettlawpl.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 904 Keith E. Crockett, Esq. 247-4831 Name of Person Daytime Telephone Number nclosed is a check for the following amount: □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, S25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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 Florida document number <u>L16000022181</u> .	v were filed on 02/01/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		0F)
		
Enter new mailing address, if applicable:		Pii
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, enter th	e name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	- · · · - · - · - · - · - · - · - · - ·
	Flor	ida
- -	City	Zip Code

w Registered Agent's Signature, if changing Registered Agent:

MAWHAROLD ENTERPRISES, LLC

sereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability inpany 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
AMBR	Andrew E. Harold Jr.	255 Deer Haven Drive	□Add
		Ponte Vedra Beach, FL 32082	≡ Remove
			□ Change
			□Add
		Remove	
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			
			□Add
			□Remove
			□ Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			Remove
			☐Change

32226.	
2) For Michelle A. Harold, please change her title from	n MGR to AMBR.
	-
	
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fective date, if other than the date of filing:	
n effective date is listed, the date must be specific and cannot be pote: If the date inserted in this block does not meet the approximent's effective date on the Department of State's reconstruction.	(optional) rior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 plicable statutory filing requirements, this date will not be listed as rds.
ecord specifies a delayed effective date, but not an effective is filed.	re time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	
· ·	 `
Signature of a member or a	uthorized representative of a member
Andrew E. Harold Jr.	Digitally signed by Andrew E. Harold Jr. Date: 2020.12.03 20:39:31 -05'00'

Typed or printed name of signee

Filing Fee: \$25.00