L16000101382

(Re	questor's Name)	
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 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:
Joseph Ham Name of Person
Jor Ham Int
4 Sarah Lane
Fort Walton Beach F1. 33547 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joseph Ham at (950) 240.1144 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$\Bigcup \$60.00 Filing Fee, 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

Joe Ham Lite	, <u> </u>	
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	.
The Articles of Organization for this Limited Liability Company Florida document number <u>L. 1600010138</u> 2.	were filed on APT 22.	<u> 2019</u> and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ew name of the limited liability company here: contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" is, if applicable: CA STREET ADDRESS licable: COFFICE BOX) agent and/or registered office address on our records, enter the name of the new existered office address here: Agent: dress: Enter Florida street address Florida City Florida	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or	r 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 o registered agent and/or the new registered office address her		enter the name of the new
		S. S.
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florido street address	- 2
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>	Single Sign

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>	Name	Address	Type of Action
AMBR	Mary Touchton	316 Nathey Ave Niceville Florida 325	■ Add
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E. Effective date, if other (If an effective date is listed, Note: If the date inserte document's effective date	the date must be specific ed in this block does n	and canno of meet th	e applicabl	date of filing le statutory	or more than 9	(option: 0 days after filt ments, this da	al) ng.) Pursu	unt to 60 of be lis	05.0207 (3) sted as the
If the record specifies (b) The 90th day afte			but not a	an effectiv	ve time, at	12:01 a.n	n. on th	e eari	ier of:
Dated May	30_	🗹	1019						
	Signature	of a membe	r or authoriz	zed represent	ntive of a mem	ber			
_ 50	Seph	Har	or printed i	name of signs	ee		-		

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Filing Fee: \$25.00