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(Ad	idress)	
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(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	*)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	·)
(Do	cument Number)	
Certified Copies	Certificates o	if Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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SECHETARY OF STATE

And

May 11, 2023

Department of the Treasury Internal Revenue Service Ogden UT 84201-0013

> RE: Brady Hollenbacher Golf LLC Tax ID # 81-3040989 Name Change

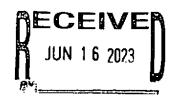
Dear Revenue Officer:

Please note, that on May 11, 2023 Articles of Correction were filed with the Florida Department of State to change the name of Brady Hollenbacher Golf, LLC to Hollenbacher Insurance, LLC. This change is effective immediately. We are writing to ask that you change this on your end as soon as possible.

Thank you,

Brady Hollenbacher, Managing Member

Holmmun-



COVER LETTER

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

CURLICATE BRADY H	IOLLENBACHER GOLF LLC		
SUBJECT: Didiby in	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub ondence concerning this matter		
	BRADY HOLLENBACH	ER	
		Name of Person	
			3
		Firm/Company	
	161 CASTLEGATE LAN	E	
		Address	
	SAINT JOHNS FL 32259		
		City/State and Zip Code	
	brady hollenbachergolf@gn		
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report not	fication)
BRADY HOLLENBAC	THER	at (904) 718-6414	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	
Registration		Registration Sc	
Division of C P.O. Box 632	•	Division of Cor The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRADY HOLLENBACHER GOLF 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 JUNE 24, 2016 and assigned Florida document number L16000121732 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: HOLLENBACHER INSURANCE LLC 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:

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

Enter Florida street address

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
			□Add
			□Remove
			☐ Change
			□Add
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Bollman.	
Signature of a member or authorized representative of a member	Dated MAY 11 , 2023 .
Signature of a member or authorized representative of a member	Ballman
	Signature of a member or authorized representative of a member